

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 1-5-97

TIME 2200

updated 5-15-96

|   |  |  |  |                                |
|---|--|--|--|--------------------------------|
| ANSWERED  |  | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>                  | Guard <input type="checkbox"/> |
| Name of person calling <u>Orval Harris</u>  |  |  | Was 333 called? <u>NO</u> Walk in                |                                |
| Nature of emergency   | <input type="checkbox"/> Accident <input checked="" type="checkbox"/> SPA <input checked="" type="checkbox"/> Release (amount <u>2 gal</u> ) | Number of people injured <u>      </u>   |  |                                |
| <input type="checkbox"/> Fire <input type="checkbox"/> Explosion  |  |  |  |                                |
| Detailed Comments: <u>Leak in #2 SPA Product Line</u>   |  |  |  |                                |
| Area of emergency   | <input type="checkbox"/> Calciner  | <input checked="" type="checkbox"/> Phos   | <input type="checkbox"/> Chem bldg               |                                |
|   | <input type="checkbox"/> (397)   | <input type="checkbox"/> (345,371)   | <input type="checkbox"/> (212,413,301,210)       |                                |
|   | <input type="checkbox"/> Wash Plant  | <input checked="" type="checkbox"/> SPA  | <input type="checkbox"/> Warehouse               |                                |
|   | <input type="checkbox"/> (248,249)   | <input type="checkbox"/> (370)   | <input type="checkbox"/> (338,396)               |                                |
|   | <input type="checkbox"/> N.E.Maint   | <input type="checkbox"/> North H2SO4   | <input type="checkbox"/> Maint. Shop             |                                |
|   | <input type="checkbox"/> (251,412)   | <input type="checkbox"/> (359)   | <input type="checkbox"/> (221)                   |                                |
|   | <input type="checkbox"/> Rollover & Reclaim  | <input type="checkbox"/> East H2SO4  | <input type="checkbox"/> Shipping                |                                |
|   | <input type="checkbox"/> (232,236)   | <input type="checkbox"/> (358)   | <input type="checkbox"/> (348)                   |                                |
|   | <input type="checkbox"/> E&I shop  | <input type="checkbox"/> West H2SO4  | <input type="checkbox"/> NH3 Maint shop          |                                |
|   | <input type="checkbox"/> (258,268)   | <input type="checkbox"/> (346)   | <input type="checkbox"/> (423)                   |                                |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> Silica  | <input type="checkbox"/> Front offices   |  |                                |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (224,225,226)   | <input type="checkbox"/> (0,266)   |  |                                |
| <input type="checkbox"/> Pond   | <input type="checkbox"/> DAP   | <input type="checkbox"/> NH3 Sphere  |  |                                |
|   | <input type="checkbox"/> (227)   | <input type="checkbox"/> east or west  |  |                                |
| Nature of injuries  | <input checked="" type="checkbox"/> None   | <input type="checkbox"/> Thermal burn  | <input type="checkbox"/> Laceration              |                                |
|   | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Other                   |                                |
| Area of body affected   | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                    |                                |
|   | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands   | <input type="checkbox"/> Legs                    |                                |
|   | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest   | <input type="checkbox"/> Feet                    |                                |
| Do we Need?   | <input type="checkbox"/> Ambulance   | <input type="checkbox"/> Evacuation  | <input type="checkbox"/> Emergency Response Team |                                |
|   | <input type="checkbox"/> Other   | <input checked="" type="checkbox"/> None   |  |                                |
| Wind direction & speed  | MPH <u>0</u>   |  |  |                                |
|   | Cross out area that the wind is coming from. This will tell where to send the people to.   |  |  |                                |
| Send to Zone <u>      </u> No wind send to Zone 3   |  |  |  |                                |
| Filled out by <u>Anthony W. [Signature]</u>   |  | Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West <input type="checkbox"/> South to North <input type="checkbox"/> West to East |  |                                |
| As soon as the caller hangs up, they must come to the fab to guide the First aid people to the scene of the accident. |  |  |  |                                |

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 1-11-97

TIME 2145

updated 5-15-96

|  |  |  |   |   |
|--|--|--|---|---|
| ANSWERED   |  | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>                         | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Dale Humphreys</u>   |  |  | Was 333 called? <input type="checkbox"/>                |   |
| Nature of emergency  | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire | <input checked="" type="checkbox"/> Release (amount <u>50 gm</u> )<br><input type="checkbox"/> Explosion   | Number of people injured <u>          </u>              |   |
| Detailed Comments: <u>70 % Super Phosphoric Acid</u>   |  |  |   |   |
| Area of emergency  | <input type="checkbox"/> Calciner<br>(397)                         | <input type="checkbox"/> Phos<br>(345,371)   | <input type="checkbox"/> Chem bldg<br>(212,413,301,210) |   |
|  | <input type="checkbox"/> Wash Plant<br>(248,249)                   | <input checked="" type="checkbox"/> SPA<br>(370)   | <input type="checkbox"/> Warehouse<br>(338,396)         |   |
|  | <input type="checkbox"/> N.E. Maint<br>(251,412)                   | <input type="checkbox"/> North H2SO4<br>(359)  | <input type="checkbox"/> Maint. Shop<br>(221)           |   |
|  | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)           | <input type="checkbox"/> East H2SO4<br>(358)   | <input type="checkbox"/> Shipping<br>(348)              |   |
|  | <input type="checkbox"/> E&I shop<br>(258,268)                     | <input type="checkbox"/> West H2SO4<br>(346)   | <input type="checkbox"/> NH3 Maint shop<br>(423)        |   |
|  | <input type="checkbox"/> Ball Mill<br>(344)                        | <input type="checkbox"/> Silica<br>(224,225,226)   | <input type="checkbox"/> Front offices<br>(0,266)       |   |
|  | <input type="checkbox"/> Pond                                      | <input type="checkbox"/> DAP<br>(227)  | <input type="checkbox"/> NH3 Sphere<br>east or west     |   |
|  |  |  |   |   |
|  |  |  |   |   |
|  | Nature of injuries   |  |   |   |
| <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other  |  |  |   |   |
| Area of body affected  |  |  |   |   |
| <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back<br><input type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs<br><input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet |  |  |   |   |
| Do we Need?  |  |  |   |   |
| <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input checked="" type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input type="checkbox"/> None   |  |  |   |   |
| Wind direction & speed   |  |  |   |   |
| MPH <u>9</u>   |  |  |   |   |
| Cross out area that the wind is coming from. This will tell where to send the people to.   |  |  |   |   |
| Send to Zone <u>          </u> No wind send to Zone 3  |  |  |   |   |
| Filled out by <u>Howard E Johnson</u>  |  | Visual check   |   |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.  |  | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |   |   |

South East to North West

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 1-18-97

TIME 12:45

updated 5-15-96

|  |   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
|--|---|--|---|--|---|------------------------------------|--|--|--|---|---|--|---|---|---|---|--|---|--|-------------------------------|------------------------------------|--|
| ANSWERED Phone <u>Dead</u> Lab <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Guard <input checked="" type="checkbox"/> |   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Name of person calling <u>Scam Moore</u> Was 333 called? <u>NO</u>   |   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Nature of emergency  | <input type="checkbox"/> Accident <input checked="" type="checkbox"/> Release (amount <u>4,504</u> ) Number of people injured <u>None</u><br><input type="checkbox"/> Fire <input type="checkbox"/> Explosion   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Detailed Comments: <u>Power Failure Pump Down 98 Tank Ran over 200 - 500 gal Spill Time 12:03</u>  |   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Area of emergency  | <table border="0" style="width:100%;"> <tr> <td><input type="checkbox"/> Calciner (397)</td> <td><input type="checkbox"/> Phos (345,371)</td> <td><input type="checkbox"/> Chem bldg (212,413,301,210)</td> </tr> <tr> <td><input type="checkbox"/> Wash Plant (248,249)</td> <td><input type="checkbox"/> SPA (370)</td> <td><input type="checkbox"/> Warehouse (338,396)</td> </tr> <tr> <td><input type="checkbox"/> N.E.Maint (251,412)</td> <td><input type="checkbox"/> North H2SO4 (359)</td> <td><input type="checkbox"/> Maint Shop (221)</td> </tr> <tr> <td><input type="checkbox"/> Rollover &amp; Reclaim (232,236)</td> <td><input checked="" type="checkbox"/> East H2SO4 (358)</td> <td><input type="checkbox"/> Shipping (348)</td> </tr> <tr> <td><input type="checkbox"/> E&amp;I shop (258,268)</td> <td><input type="checkbox"/> West H2SO4 (346)</td> <td><input type="checkbox"/> NH3 Maint shop (423)</td> </tr> <tr> <td><input type="checkbox"/> Ball Mill (344)</td> <td><input type="checkbox"/> Silica (224,225,226)</td> <td><input type="checkbox"/> Front offices (0,266)</td> </tr> <tr> <td><input type="checkbox"/> Pond</td> <td><input type="checkbox"/> DAP (227)</td> <td><input type="checkbox"/> NH3 Sphere east or west</td> </tr> </table> | <input type="checkbox"/> Calciner (397)              | <input type="checkbox"/> Phos (345,371) | <input type="checkbox"/> Chem bldg (212,413,301,210) | <input type="checkbox"/> Wash Plant (248,249) | <input type="checkbox"/> SPA (370) | <input type="checkbox"/> Warehouse (338,396) | <input type="checkbox"/> N.E.Maint (251,412) | <input type="checkbox"/> North H2SO4 (359) | <input type="checkbox"/> Maint Shop (221) | <input type="checkbox"/> Rollover & Reclaim (232,236) | <input checked="" type="checkbox"/> East H2SO4 (358) | <input type="checkbox"/> Shipping (348) | <input type="checkbox"/> E&I shop (258,268) | <input type="checkbox"/> West H2SO4 (346) | <input type="checkbox"/> NH3 Maint shop (423) | <input type="checkbox"/> Ball Mill (344) | <input type="checkbox"/> Silica (224,225,226) | <input type="checkbox"/> Front offices (0,266) | <input type="checkbox"/> Pond | <input type="checkbox"/> DAP (227) | <input type="checkbox"/> NH3 Sphere east or west |
| <input type="checkbox"/> Calciner (397)  | <input type="checkbox"/> Phos (345,371)   | <input type="checkbox"/> Chem bldg (212,413,301,210) |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Wash Plant (248,249)  | <input type="checkbox"/> SPA (370)  | <input type="checkbox"/> Warehouse (338,396)         |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> N.E.Maint (251,412)   | <input type="checkbox"/> North H2SO4 (359)  | <input type="checkbox"/> Maint Shop (221)            |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Rollover & Reclaim (232,236)  | <input checked="" type="checkbox"/> East H2SO4 (358)  | <input type="checkbox"/> Shipping (348)              |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> E&I shop (258,268)  | <input type="checkbox"/> West H2SO4 (346)   | <input type="checkbox"/> NH3 Maint shop (423)        |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Ball Mill (344)   | <input type="checkbox"/> Silica (224,225,226)   | <input type="checkbox"/> Front offices (0,266)       |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Pond  | <input type="checkbox"/> DAP (227)  | <input type="checkbox"/> NH3 Sphere east or west     |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Nature of Injuries   | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Area of body affected  | <table border="0" style="width:100%;"> <tr> <td><input type="checkbox"/> Eyes</td> <td><input type="checkbox"/> Arms</td> <td><input type="checkbox"/> Back</td> </tr> <tr> <td><input type="checkbox"/> Face &amp; head</td> <td><input type="checkbox"/> Hands</td> <td><input type="checkbox"/> Legs</td> </tr> <tr> <td><input type="checkbox"/> Neck</td> <td><input type="checkbox"/> Chest</td> <td><input type="checkbox"/> Feet</td> </tr> </table>  | <input type="checkbox"/> Eyes                        | <input type="checkbox"/> Arms           | <input type="checkbox"/> Back                        | <input type="checkbox"/> Face & head          | <input type="checkbox"/> Hands     | <input type="checkbox"/> Legs                | <input type="checkbox"/> Neck                | <input type="checkbox"/> Chest             | <input type="checkbox"/> Feet             |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms   | <input type="checkbox"/> Back                        |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands  | <input type="checkbox"/> Legs                        |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest  | <input type="checkbox"/> Feet                        |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Do we Need?  | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input checked="" type="checkbox"/> None  |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Wind direction & speed   | MPH <u>0</u> <u>No wind</u><br>Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone <u>1</u> No wind send to Zone 3   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |
| Filled out by <u>Scam Moore</u>  | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  |   |  |   |                                    |  |  |  |   |   |  |   |   |   |   |  |   |  |                               |                                    |  |

Visual NO wind

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 1-16-97

TIME 11:14

updated 5-15-96

|   |   |  |  |                |
|---|---|--|--|----------------|
| ANSWERED  |   | Lab <u>/</u>   | Safety <u>/</u>                            | Guard <u>✓</u> |
| Name of person calling <u>Mac Singleton</u>   |   |  | Was 333 called? <u>Yes</u>                 |                |
| Nature of emergency   | <u>Accident</u>   | <u>✓</u> Release (amount <u>50 gal</u> )   | Number of people injured <u>          </u> |                |
|   | <u>Fire</u>   | <u>Explosion</u>   |  |                |
| Detailed Comments: <u>Liquid caustic NaOH 50%</u>   |   |  |  |                |
| Area of emergency   | <u>Calciner</u>   | <u>Phos</u>  | <u>Chem bldg</u>                           |                |
|   | <u>(397)</u>  | <u>(345,371)</u>   | <u>(212,413,301,210)</u>                   |                |
|   | <u>Wash Plant</u>   | <u>SPA</u>   | <u>Warehouse</u>                           |                |
|   | <u>(248,249)</u>  | <u>(370)</u>   | <u>(338,396)</u>                           |                |
|   | <u>N.E.Maint</u>  | <u>North H2SO4</u>   | <u>Maint. Shop</u>                         |                |
|   | <u>(251,412)</u>  | <u>(359)</u>   | <u>(221)</u>                               |                |
|   | <u>Rollover &amp; Reclaim</u>   | <u>✓ East H2SO4</u>  | <u>Shipping</u>                            |                |
|   | <u>(232,236)</u>  | <u>(358)</u>   | <u>(348)</u>                               |                |
|   | <u>E&amp;I shop</u>   | <u>West H2SO4</u>  | <u>NH3 Maint shop</u>                      |                |
|   | <u>(258,268)</u>  | <u>(346)</u>   | <u>(423)</u>                               |                |
| <u>Ball Mill</u>  | <u>Silica</u>   | <u>Front offices</u>   |  |                |
| <u>(344)</u>  | <u>(224,225,226)</u>  | <u>(0,266)</u>   |  |                |
| <u>Pond</u>   | <u>DAP</u>  | <u>NH3 Sphere</u>  |  |                |
|   | <u>(227)</u>  | <u>east or west</u>  |  |                |
| Nature of injuries  | <u>None</u>   | <u>Thermal burn</u>  | <u>Laceration</u>                          |                |
|   | <u>Fall</u>   | <u>Chemical burn</u>   | <u>✓ Other</u>                             |                |
| Area of body affected   | <u>Eyes</u>   | <u>Arms</u>  | <u>Back</u>                                |                |
|   | <u>Face &amp; head</u>  | <u>Hands</u>   | <u>Legs</u>                                |                |
|   | <u>Neck</u>   | <u>Chest</u>   | <u>Feet</u>                                |                |
| Do we Need?   | <u>Ambulance</u>  | <u>Evacuation</u>  | <u>Emergency Response Team</u>             |                |
|   | <u>Other</u>  | <u>None</u>  |  |                |
| Wind direction & speed  | MPH <u>2</u>  |  |  |                |
|   | Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone <u>          </u> No wind send to Zone 3 |  |  |                |
| Filled out by <u>David Hishman</u>  |   |  |  |                |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |  |                |
| Visual check <u>Calvin</u>  |   | <u>North to South</u> <u>East to West</u><br><u>South to North</u> <u>West to East</u> |  |                |

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 2-22-97  
TIME 1700  
updated 5-15-96

|   |   |   |   |   |
|---|---|---|---|---|
| ANSWERED  |   | Lab <input checked="" type="checkbox"/>                           | Safety <input type="checkbox"/>                     | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Clair Christensen</u>   |   |   | Was 333 called? <input checked="" type="checkbox"/> |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input checked="" type="checkbox"/> Release (amount <u>300+</u> ) | Number of people injured <u>          </u>          |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion <u>phosphoric</u>              |   |   |
| Detailed Comments: <u>Acid coming out of the ground, ground sinking</u>   |   |   |   |   |
| Area of emergency   | <input type="checkbox"/> Calciner   | <input type="checkbox"/> Phos                                     | <input type="checkbox"/> Chem bldg                  |   |
|   | <input type="checkbox"/> (397)  | <input type="checkbox"/> (345,371)                                | <input type="checkbox"/> (212,413,301,210)          |   |
|   | <input type="checkbox"/> Wash Plant   | <input checked="" type="checkbox"/> SPA north curved              | <input type="checkbox"/> Warehouse                  |   |
|   | <input type="checkbox"/> (248,249)  | <input type="checkbox"/> (370)                                    | <input type="checkbox"/> (338,396)                  |   |
|   | <input type="checkbox"/> N.E.Maint  | <input type="checkbox"/> North H2SO4                              | <input type="checkbox"/> Maint. Shop                |   |
|   | <input type="checkbox"/> (251,412)  | <input type="checkbox"/> (359)                                    | <input type="checkbox"/> (221)                      |   |
|   | <input type="checkbox"/> Rollover & Reclaim   | <input type="checkbox"/> East H2SO4                               | <input type="checkbox"/> Shipping                   |   |
|   | <input type="checkbox"/> (232,236)  | <input type="checkbox"/> (358)                                    | <input type="checkbox"/> (348)                      |   |
|   | <input type="checkbox"/> E&I shop   | <input type="checkbox"/> West H2SO4                               | <input type="checkbox"/> NH3 Maint shop             |   |
|   | <input type="checkbox"/> (258,268)  | <input type="checkbox"/> (346)                                    | <input type="checkbox"/> (423)                      |   |
|   | <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> Silica                                   | <input type="checkbox"/> Front offices              |   |
|   | <input type="checkbox"/> (344)  | <input type="checkbox"/> (224,225,226)                            | <input type="checkbox"/> (0,266)                    |   |
|   | <input type="checkbox"/> Pond   | <input type="checkbox"/> DAP                                      | <input type="checkbox"/> NH3 Sphere                 |   |
|   |   | <input type="checkbox"/> (227)                                    | <input type="checkbox"/> east or west               |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None  | <input type="checkbox"/> Thermal burn                             | <input type="checkbox"/> Laceration                 |   |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn                            | <input type="checkbox"/> Other                      |   |
| Area of body affected   | <input checked="" type="checkbox"/> Eyes  | <input type="checkbox"/> Arms                                     | <input type="checkbox"/> Back                       |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands                                    | <input type="checkbox"/> Legs                       |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest                                    | <input type="checkbox"/> Feet                       |   |
|   | <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/>                            |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation                               | <input type="checkbox"/> Emergency Response Team    |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None                          |   |   |
| Wind direction & speed  | <div style="display: flex; align-items: center;"> <div style="flex: 1;"> <p>MPH <u>0 wind</u></p> <p>Cross out area that the wind is coming from.</p> <p>This will tell where to send the people to.</p> <p>Send to Zone <u>          </u> No wind send to Zone 3</p> </div> <div style="flex: 2;"> </div> </div> |   |   |   |
|   | <p>Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West</p> <p><input type="checkbox"/> South to North <input type="checkbox"/> West to East</p>  |   |   |   |
| <p>Filled out by <u>Tony [signature]</u></p> <p>As soon as the caller hangs up, they must come to the lab to guide the first aid people to the scene of the accident.</p> |   |   |   |   |

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 2-23-97

TIME 22:55

updated 5-15-96

|  |  |  |   |   |
|--|--|--|---|---|
| ANSWERED                                   |  | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>   | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Scott Nelson</u> |  |  | Was 333 called? <input type="checkbox"/>  |   |
| Nature of emergency                        | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire   | <input checked="" type="checkbox"/> Release (amount <u>30 gal</u> )<br><input type="checkbox"/> Explosion  | Number of people injured <u>30% Acid</u>  |   |
| Detailed Comments: _____                   |  |  |   |   |
| Area of emergency                          | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E. Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos<br>(345,371)<br><input checked="" type="checkbox"/> SPA<br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> West H2SO4<br>(346)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |   |
| Nature of injuries                         | <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall<br><input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn<br><input type="checkbox"/> Laceration<br><input type="checkbox"/> Other  |  |   |   |
| Area of body affected                      | <input checked="" type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head<br><input type="checkbox"/> Neck<br><input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest<br><input type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet                        |  |   |   |
| Do we Need?                                | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other<br><input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None<br><input type="checkbox"/> Emergency Response Team  |  |   |   |
| Wind direction & speed                     | MPH <u>5</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3   |  |   |   |
| Filled out by <u>David Thompson</u>        | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.  |  |   |   |

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 3-21-97

TIME 11:48

updated 5-15-96

|   |   |  |                                  |                |
|---|---|--|----------------------------------|----------------|
| <b>ANSWERED</b>   |   | Lab <u>X</u>   | Safety <u>X</u>                  | Guard <u>X</u> |
| Name of person calling <u>Derry Hatch</u>   |   |  | Was 333 called? <u>YES</u>       |                |
| Nature of emergency   | <u>Accident</u>   | <u>X</u> Release (amount <u>Undetermined</u> )   | Number of                        |                |
|   | <u>Fire</u>   | <u>Explosion</u> <u>Phos Acc</u>   | <u>people injured</u> <u>N/A</u> |                |
| Detailed Comments: _____  |   |  |                                  |                |
| Area of emergency   | <u>Calciner</u>   | <u>Phos</u>  | <u>Chem bldg</u>                 |                |
|   | <u>(397)</u>  | <u>(345,371)</u>   | <u>(212,413,301,210)</u>         |                |
|   | <u>Wash Plant</u>   | <u>X SPA North ca-wash</u>   | <u>Warehouse</u>                 |                |
|   | <u>(248,249)</u>  | <u>(370)</u>   | <u>(338,396)</u>                 |                |
|   | <u>N.E.Maint</u>  | <u>North H2SO4</u>   | <u>Maint. Shop</u>               |                |
|   | <u>(251,412)</u>  | <u>(359)</u>   | <u>(221)</u>                     |                |
|   | <u>Rollover &amp; Reclaim</u>   | <u>East H2SO4</u>  | <u>Shipping</u>                  |                |
|   | <u>(232,236)</u>  | <u>(358)</u>   | <u>(348)</u>                     |                |
|   | <u>E&amp;I shop</u>   | <u>West H2SO4</u>  | <u>NH3 Maint shop</u>            |                |
|   | <u>(258,268)</u>  | <u>(346)</u>   | <u>(423)</u>                     |                |
| <u>Ball Mill</u>  | <u>Silica</u>   | <u>Front offices</u>   |                                  |                |
| <u>(344)</u>  | <u>(224,225,226)</u>  | <u>(0,266)</u>   |                                  |                |
| <u>Pond</u>   | <u>DAP</u>  | <u>NH3 Sphere</u>  |                                  |                |
|   | <u>(227)</u>  | <u>east or west</u>  |                                  |                |
| Nature of injuries  | <u>None</u>   | <u>Thermal burn</u>  | <u>Laceration</u>                |                |
|   | <u>Fall</u>   | <u>Chemical burn</u>   | <u>Other</u>                     |                |
| Area of body affected   | <u>Eyes</u>   | <u>Arms</u>  | <u>Back</u>                      |                |
|   | <u>Face &amp; head</u>  | <u>Hands</u>   | <u>Legs</u>                      |                |
|   | <u>Neck</u>   | <u>Chest</u>   | <u>Feet</u>                      |                |
| Do we Need?   | <u>Ambulance</u>  | <u>Evacuation</u>  | <u>Emergency Response Team</u>   |                |
|   | <u>Other</u>  | <u>None</u>  |                                  |                |
| Wind direction & speed  | MPH <u>0</u>  |  |                                  |                |
|   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone 1      No wind send to Zone 3 |  |                                  |                |
| Filled out by <u>Howard Johnson</u>   |   |  |                                  |                |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |                                  |                |
| Visual check  |   | <u>X</u> North to South <u>East to West</u><br><u>South to North</u> <u>West to East</u> |                                  |                |

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 4-3-97

TIME 0925

updated 3/11/97 2%

|  |   |  |   |
|--|---|--|---|
| <b>ANSWERED</b>                              |   |  |   |
| Lab <input checked="" type="checkbox"/>      | Safety <input type="checkbox"/>   | Guard <input checked="" type="checkbox"/>  |   |
| Name of person calling <u>Dale Humphries</u> |   | Was 333 called? <u>Yes</u>   |   |
| Nature of emergency                          | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  | <input checked="" type="checkbox"/> Release (amount <u>200gal</u> )<br><input type="checkbox"/> Explosion <u>30%</u>   | Number of people injured <u>None</u>  |
| Detailed Comments: _____                     |   |  |   |
| Area of emergency                            | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E.Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos<br>(345,371)<br><input checked="" type="checkbox"/> SPA<br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |
| Nature of injuries                           | <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall   | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other   |
| Area of body affected                        | <input checked="" type="checkbox"/> Eyes<br><input checked="" type="checkbox"/> Face & head<br><input type="checkbox"/> Neck  | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest  | <input type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet   |
| Do we Need?                                  | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other  | <input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None  | <input type="checkbox"/> Emergency Response Team  |
| Wind direction & speed                       | MPH <u>Calm</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3   |  |   |
| Filled out by <u>HH</u>                      | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  |   |

Emergency Response Team

Visual check: ☐ North to South ☐ East to West  
☐ South to North ☐ West to East

Excel File : 333 Checklist



# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 5-10-97

TIME 1355

updated 3/1/97 2%

|  |   |   |  |   |                                 |   |
|--|---|---|--|---|---------------------------------|---|
| <b>ANSWERED</b>  |   |   |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Brett Hynes</u>  |   |   |  | Was 333 called? <u>yes</u>  |                                 |   |
| Nature of emergency  |   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  |  | <input checked="" type="checkbox"/> Spill <input checked="" type="checkbox"/> Release (amount <u>200 gals</u> )<br><input type="checkbox"/> Explosion |                                 | Number of people injured <u>0</u>         |
| Detailed Comments: <u>Tank 56 overflowed while being filled.</u>   |   |   |  |   |                                 |   |
| Area of emergency  | <input type="checkbox"/> Calciner           | <input type="checkbox"/> Phos   | <input type="checkbox"/> Chem bldg         |   |                                 |   |
|  | <input type="checkbox"/> (397)              | <input type="checkbox"/> (345,371)  | <input type="checkbox"/> (212,413,301,210) |   |                                 |   |
|  | <input type="checkbox"/> Wash Plant         | <input checked="" type="checkbox"/> SPA <u>7256</u>   | <input type="checkbox"/> Warehouse         |   |                                 |   |
|  | <input type="checkbox"/> (248,249)          | <input type="checkbox"/> (370)  | <input type="checkbox"/> (338,396)         |   |                                 |   |
|  | <input type="checkbox"/> N.E. Maint         | <input type="checkbox"/> North H2SO4  | <input type="checkbox"/> Maint. Shop       |   |                                 |   |
|  | <input type="checkbox"/> (251,412)          | <input type="checkbox"/> (359)  | <input type="checkbox"/> (221)             |   |                                 |   |
|  | <input type="checkbox"/> Rollover & Reclaim | <input type="checkbox"/> East H2SO4   | <input type="checkbox"/> Shipping          |   |                                 |   |
|  | <input type="checkbox"/> (232,236)          | <input type="checkbox"/> (358)  | <input type="checkbox"/> (348)             |   |                                 |   |
|  | <input type="checkbox"/> E&I shop           | <input type="checkbox"/> Silica   | <input type="checkbox"/> NH3 Maint shop    |   |                                 |   |
|  | <input type="checkbox"/> (258,268)          | <input type="checkbox"/> (224,225,226)  | <input type="checkbox"/> (423)             |   |                                 |   |
| <input type="checkbox"/> Ball Mill   | <input type="checkbox"/> DAP                | <input type="checkbox"/> Front offices  |  |   |                                 |   |
| <input type="checkbox"/> (344)   | <input type="checkbox"/> (227)              | <input type="checkbox"/> (0,266)  |  |   |                                 |   |
| <input type="checkbox"/> Pond  |   | <input type="checkbox"/> NH3 Sphere east or west  |  |   |                                 |   |
| Nature of injuries   |   |   |  |   |                                 |   |
| <input checked="" type="checkbox"/> None   |   | <input type="checkbox"/> Thermal burn   |  | <input type="checkbox"/> Laceration   |                                 |   |
| <input type="checkbox"/> Fall  |   | <input type="checkbox"/> Chemical burn  |  | <input type="checkbox"/> Other  |                                 |   |
| Area of body affected  |   |   |  |   |                                 |   |
| <input type="checkbox"/> Eyes  |   | <input type="checkbox"/> Arms   |  | <input type="checkbox"/> Back   |                                 |   |
| <input type="checkbox"/> Face & head   |   | <input type="checkbox"/> Hands  |  | <input type="checkbox"/> Legs   |                                 |   |
| <input type="checkbox"/> Neck  |   | <input type="checkbox"/> Chest  |  | <input type="checkbox"/> Feet   |                                 |   |
| Do we Need?  |   |   |  |   |                                 |   |
| <input type="checkbox"/> Ambulance   |   | <input type="checkbox"/> Evacuation   |  | <input type="checkbox"/> Emergency Response Team  |                                 |   |
| <input type="checkbox"/> Other   |   | <input type="checkbox"/> None   |  |   |                                 |   |
| Wind direction & speed   |   |   |  |   |                                 |   |
| MPH <u>4</u>   |   |   |  |   |                                 |   |
| Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone <u>3</u> No wind send to Zone 3 |   |   |  |   |                                 |   |
| Filled out by <u>Brian Rawland</u>   |   | Visual check  |  |   |                                 |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.                    |   | <input type="checkbox"/> North to South<br><input type="checkbox"/> South to North<br><input checked="" type="checkbox"/> East to West<br><input type="checkbox"/> West to East |  |   |                                 |   |

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

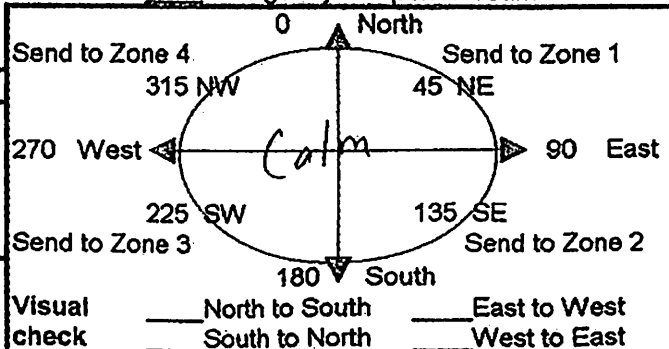
Agrium CPO

DATE 5-12-97

TIME 0600

updated 3/11/97 2%

|   |   |  |   |
|---|---|--|---|
| <b>ANSWERED</b>   |   |  |   |
| Lab   | Safety  | Guard  |   |
| Name of person calling <u>Jerry Hatch</u>                                     |   | Was 333 called? <u>ALP</u>   |   |
| Nature of emergency   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  | <input checked="" type="checkbox"/> Release (amount <u>150 gal</u> )<br><input type="checkbox"/> Explosion | Number of people injured _____                          |
| Detailed Comments: <u>North Car wash RAN OVER (150 gal condensate) pH 2.3</u> |   |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)  | <input type="checkbox"/> Phos<br>(345,371)   | <input type="checkbox"/> Chem bldg<br>(212,413,301,210) |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)  | <input checked="" type="checkbox"/> SPA<br>(370)   | <input type="checkbox"/> Warehouse<br>(338,396)         |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)   | <input type="checkbox"/> North H2SO4<br>(359)  | <input type="checkbox"/> Maint. Shop<br>(221)           |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)  | <input type="checkbox"/> East H2SO4<br>(358)   | <input type="checkbox"/> Shipping<br>(348)              |
|   | <input type="checkbox"/> E&I shop<br>(258,268)  | <input type="checkbox"/> Silica<br>(224,225,226)   | <input type="checkbox"/> NH3 Maint shop<br>(423)        |
|   | <input type="checkbox"/> Ball Mill<br>(344)   | <input type="checkbox"/> DAP<br>(227)  | <input type="checkbox"/> Front offices<br>(0,266)       |
|   | <input type="checkbox"/> Pond   |  | <input type="checkbox"/> NH3 Sphere<br>east or west     |
|   |   |  |   |
|   |   |  |   |
|   |   |  |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None  | <input type="checkbox"/> Thermal burn  | <input type="checkbox"/> Laceration                     |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Other                          |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                           |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands   | <input type="checkbox"/> Legs                           |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest   | <input type="checkbox"/> Feet                           |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation  | <input type="checkbox"/> Emergency Response Team        |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None   |   |
| Wind direction & speed  | MPH <u>0</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3    |  |   |
|   | Filled out by <u>Daren Maughan</u><br>As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |  |   |



Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 5-15-97

TIME 1345

updated 3/11/97 2%

|  |  |  |  |   |
|--|--|--|--|---|
| <b>ANSWERED</b>                                    |  | Lab <input checked="" type="checkbox"/>                            | Safety <input type="checkbox"/>                  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>ORVAL HARRIS</u>         |  |  | Was 333 called? <u>yes</u>                       |   |
| Nature of emergency                                | Accident <u>Spill</u>  | <input checked="" type="checkbox"/> Release (amount <u>4 gal</u> ) | Number of people injured <u>none</u>             |   |
|  | Fire   | Explosion  |  |   |
| Detailed Comments: <u>TK 26 pump - slight leak</u> |  |  |  |   |
| Area of emergency                                  | <input type="checkbox"/> Calciner  | <input type="checkbox"/> Phos                                      | <input type="checkbox"/> Chem bldg               |   |
|  | <input type="checkbox"/> (397)   | <input type="checkbox"/> (345,371)                                 | <input type="checkbox"/> (212,413,301,210)       |   |
|  | <input type="checkbox"/> Wash Plant  | <input checked="" type="checkbox"/> SPA                            | <input type="checkbox"/> Warehouse               |   |
|  | <input type="checkbox"/> (248,249)   | <input type="checkbox"/> (370)                                     | <input type="checkbox"/> (338,396)               |   |
|  | <input type="checkbox"/> N.E.Maint   | <input type="checkbox"/> North H2SO4                               | <input type="checkbox"/> Maint. Shop             |   |
|  | <input type="checkbox"/> (251,412)   | <input type="checkbox"/> (359)                                     | <input type="checkbox"/> (221)                   |   |
|  | <input type="checkbox"/> Rollover & Reclaim  | <input type="checkbox"/> East H2SO4                                | <input type="checkbox"/> Shipping                |   |
|  | <input type="checkbox"/> (232,236)   | <input type="checkbox"/> (358)                                     | <input type="checkbox"/> (348)                   |   |
|  | <input type="checkbox"/> E&I shop  | <input type="checkbox"/> Silica                                    | <input type="checkbox"/> NH3 Maint shop          |   |
|  | <input type="checkbox"/> (258,268)   | <input type="checkbox"/> (224,225,226)                             | <input type="checkbox"/> (423)                   |   |
| <input type="checkbox"/> Ball Mill                 | <input type="checkbox"/> DAP   | <input type="checkbox"/> Front offices                             |  |   |
| <input type="checkbox"/> (344)                     | <input type="checkbox"/> (227)   | <input type="checkbox"/> (0,266)                                   |  |   |
| <input type="checkbox"/> Pond                      |  | <input type="checkbox"/> NH3 Sphere                                |  |   |
| <input type="checkbox"/> east or west              |  |  |  |   |
| Nature of injuries                                 | <input checked="" type="checkbox"/> None   | <input type="checkbox"/> Thermal burn                              | <input type="checkbox"/> Laceration              |   |
|  | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn                             | <input type="checkbox"/> Other                   |   |
| Area of body affected                              | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms                                      | <input type="checkbox"/> Back                    |   |
|  | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands                                     | <input type="checkbox"/> Legs                    |   |
|  | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest                                     | <input type="checkbox"/> Feet                    |   |
| Do we Need?  | <input checked="" type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation                                | <input type="checkbox"/> Emergency Response Team |   |
|  | <input type="checkbox"/> Other   | <input type="checkbox"/> None                                      |  |   |
| Wind direction & speed                             | MPH <u>14</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>4</u> No wind send to Zone 3 |  |  |   |
| Filled out by <u>Orval Harris</u>                  | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.  |  |  |   |
| Visual check                                       |  |  |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 5-16-97

TIME 0650

updated 3/11/97 2%

|   |   |  |   |   |
|---|---|--|---|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>                                | Safety <input type="checkbox"/>   | Guard <input checked="" type="checkbox"/>                             |
| Name of person calling <u>Clay Christensen</u>  |   | Was 333 called? <u>yes</u>   |   |   |
| Nature of emergency   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  |  | <input checked="" type="checkbox"/> Release (amount <u>large</u> )<br><input type="checkbox"/> Explosion  | Number of people injured <u>      </u>                                |
| Detailed Comments: <u>Process sewer line Return Line From Dap</u><br><u>Pond H<sub>2</sub>O Big Spill</u> |   |  |   |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)  | <input type="checkbox"/> Phos<br>(345,371)                             | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)   |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)  | <input type="checkbox"/> SPA<br>(370)                                  | <input type="checkbox"/> Warehouse<br>(338,396)   |   |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)   | <input type="checkbox"/> North H <sub>2</sub> SO <sub>4</sub><br>(359) | <input type="checkbox"/> Maint. Shop<br>(221)   |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)  | <input type="checkbox"/> East H <sub>2</sub> SO <sub>4</sub><br>(358)  | <input type="checkbox"/> Shipping<br>(348)  |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)  | <input type="checkbox"/> Silica<br>(224,225,226)                       | <input type="checkbox"/> NH <sub>3</sub> Maint shop<br>(423)  |   |
|   | <input type="checkbox"/> Ball Mill<br>(344)   | <input type="checkbox"/> DAP<br>(227)                                  | <input type="checkbox"/> Front offices<br>(0,266)   |   |
|   | <input checked="" type="checkbox"/> Pond <u>Pond H<sub>2</sub>O</u>   |  | <input type="checkbox"/> NH <sub>3</sub> Sphere<br>east or west   |   |
|   |   |  |   |   |
|   |   |  |   |   |
|   |   |  |   |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall   |  | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other |
| Area of body affected   | <input checked="" type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head  |  | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands   | <input type="checkbox"/> Back<br><input type="checkbox"/> Legs        |
|   | <input type="checkbox"/> Neck<br><input type="checkbox"/> Chest   |  | <input type="checkbox"/> Feet   |   |
| Do we Need?   | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other  |  | <input type="checkbox"/> Evacuation<br><input type="checkbox"/> None  | <input type="checkbox"/> Emergency Response Team                      |
| Wind direction & speed  | MPH <u>0</u> <u>No wind</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>      </u> No wind send to Zone 3 |  |   |   |
| Filled out by <u>Tony Woldrich</u>  | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  | Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tipples, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 10-4-97  
TIME 5-18-97  
updated 3/11/97 2%

|   |   |  |  |   |                                 |   |
|---|---|--|--|---|---------------------------------|---|
| <b>ANSWERED</b>   |   |  |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Scott Nelson</u>  |   |  |  | Was 333 called? <u>yes</u>  |                                 |   |
| Nature of emergency   |   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire   |  | <input checked="" type="checkbox"/> Release (amount <u>1000</u> )<br><input type="checkbox"/> Explosion <u>TK-263</u> |                                 | Number of people injured <u>None</u>      |
| Detailed Comments: _____  |   |  |  |   |                                 |   |
| Area of emergency   | <input type="checkbox"/> Calciner           | <input type="checkbox"/> Phos  | <input type="checkbox"/> Chem bldg         |   |                                 |   |
|   | <input type="checkbox"/> (397)              | <input type="checkbox"/> (345,371)   | <input type="checkbox"/> (212,413,301,210) |   |                                 |   |
|   | <input type="checkbox"/> Wash Plant         | <input checked="" type="checkbox"/> SPA  | <input type="checkbox"/> Warehouse         |   |                                 |   |
|   | <input type="checkbox"/> (248,249)          | <input type="checkbox"/> (370)   | <input type="checkbox"/> (338,396)         |   |                                 |   |
|   | <input type="checkbox"/> N.E.Maint          | <input type="checkbox"/> North H2SO4   | <input type="checkbox"/> Maint. Shop       |   |                                 |   |
|   | <input type="checkbox"/> (251,412)          | <input type="checkbox"/> (359)   | <input type="checkbox"/> (221)             |   |                                 |   |
|   | <input type="checkbox"/> Rollover & Reclaim | <input type="checkbox"/> East H2SO4  | <input type="checkbox"/> Shipping          |   |                                 |   |
|   | <input type="checkbox"/> (232,236)          | <input type="checkbox"/> (358)   | <input type="checkbox"/> (348)             |   |                                 |   |
|   | <input type="checkbox"/> E&I shop           | <input type="checkbox"/> Silica  | <input type="checkbox"/> NH3 Maint shop    |   |                                 |   |
|   | <input type="checkbox"/> (258,268)          | <input type="checkbox"/> (224,225,226)   | <input type="checkbox"/> (423)             |   |                                 |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP                | <input type="checkbox"/> Front offices   |  |   |                                 |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)              | <input type="checkbox"/> (0,266)   |  |   |                                 |   |
| <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere east or west   |  |   |                                 |   |
| Nature of injuries  |   |  |  |   |                                 |   |
| <input type="checkbox"/> None   |   | <input type="checkbox"/> Thermal burn  |  | <input type="checkbox"/> Laceration   |                                 |   |
| <input type="checkbox"/> Fall   |   | <input type="checkbox"/> Chemical burn   |  | <input type="checkbox"/> Other <u>N/A</u>   |                                 |   |
| Area of body affected   |   |  |  |   |                                 |   |
| <input type="checkbox"/> Eyes   |   | <input type="checkbox"/> Arms  |  | <input type="checkbox"/> Back   |                                 |   |
| <input type="checkbox"/> Face & head  |   | <input type="checkbox"/> Hands   |  | <input type="checkbox"/> Legs   |                                 |   |
| <input type="checkbox"/> Neck   |   | <input type="checkbox"/> Chest   |  | <input type="checkbox"/> Feet   |                                 |   |
| Do we Need?   |   |  |  |   |                                 |   |
| <input type="checkbox"/> Ambulance  |   | <input type="checkbox"/> Evacuation  |  | <input type="checkbox"/> Emergency Response Team  |                                 |   |
| <input type="checkbox"/> Other  |   | <input checked="" type="checkbox"/> None   |  |   |                                 |   |
| Wind direction & speed  |   | <div style="text-align: center;"> </div>   |  |   |                                 |   |
| MPH <u>15</u> <u>210°</u>   |   |  |  |   |                                 |   |
| Cross out area that the wind is coming from. This will tell where to send the people to.                              |   |  |  |   |                                 |   |
| Send to Zone _____ No wind send to Zone 3   |   |  |  |   |                                 |   |
| Filled out by <u>MTJ</u>  |   | Visual check   |  |   |                                 |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   | <input type="checkbox"/> North to South<br><input type="checkbox"/> South to North<br><input checked="" type="checkbox"/> East to West<br><input checked="" type="checkbox"/> West to East |  |   |                                 |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 5/31/97  
TIME 20:20  
updated 3/11/97 2%

|   |   |   |   |   |
|---|---|---|---|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>                                 | Safety <input type="checkbox"/>                             | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Mike Durham</u>   |   |   | Was 333 called? <u>yes</u>                                  |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input checked="" type="checkbox"/> Release (amount <u>          </u> ) | Number of people injured <u>          </u>                  |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion                                      |   |   |
| Detailed Comments: <u>Broken Gyp Line Between North Phos and Ball Mill</u>  |   |   |   |   |
| Area of emergency<br><br><i>N Ball mill Gyp Line<br/>N Phos</i>   | <input type="checkbox"/> Calciner<br>(397)  | <input checked="" type="checkbox"/> Phos<br>(345,371)                   | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)     |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)  | <input type="checkbox"/> SPA<br>(370)                                   | <input type="checkbox"/> Warehouse<br>(338,396)             |   |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)   | <input type="checkbox"/> North H2SO4<br>(359)                           | <input type="checkbox"/> Maint. Shop<br>(221)               |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)  | <input type="checkbox"/> East H2SO4<br>(358)                            | <input type="checkbox"/> Shipping<br>(348)                  |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)  | <input type="checkbox"/> Silica<br>(224,225,226)                        | <input type="checkbox"/> NH3 Maint shop<br>(423)            |   |
|   | <input checked="" type="checkbox"/> Ball Mill<br>(344)  | <input type="checkbox"/> DAP<br>(227)                                   | <input type="checkbox"/> Front offices<br>(0,266)           |   |
|   | <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere<br>east or west         |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None  | <input type="checkbox"/> Thermal burn                                   | <input type="checkbox"/> Laceration                         |   |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn                                  | <input type="checkbox"/> Other                              |   |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms   | <input type="checkbox"/> Back                               |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands  | <input type="checkbox"/> Legs                               |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest  | <input type="checkbox"/> Feet                               |   |
|   |   |   |   |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation                                     | <input checked="" type="checkbox"/> Emergency Response Team |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None                                |   |   |
| Wind direction & speed<br><u>No wind</u> MPH <u>0</u>   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>          </u> No wind send to Zone 3  |   |   |   |
|   | <div style="text-align: center;"> </div>  |   |   |   |
| Filled out by <u>Anthony Johnson</u>  | Visual check <u>No wind</u><br><input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |   |   |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |   |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 6-6-97

TIME 0128

updated 3/11/97 2%

|   |   |  |   |   |                                 |   |
|---|---|--|---|---|---------------------------------|---|
| <b>ANSWERED</b>   |   |  |   | Lab <input checked="" type="checkbox"/> | Safety <input type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Randy Peterson</u>  |   |  |   | Was 333 called? <u>Yes</u>              |                                 |   |
| Nature of emergency   |   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire | <input checked="" type="checkbox"/> Release (amount <u>10 + 15 gal</u> )<br><input type="checkbox"/> Explosion  | Number of people injured <u>0</u>       |                                 |   |
| Detailed Comments: <u>98% 10</u>  |   |  |   |   |                                 |   |
| Area of emergency   | <input type="checkbox"/> Calciner           | <input type="checkbox"/> Phos                                      | <input type="checkbox"/> Chem bldg  |   |                                 |   |
|   | <input type="checkbox"/> (397)              | <input type="checkbox"/> (345,371)                                 | <input type="checkbox"/> (212,413,301,210)  |   |                                 |   |
|   | <input type="checkbox"/> Wash Plant         | <input type="checkbox"/> SPA                                       | <input type="checkbox"/> Warehouse  |   |                                 |   |
|   | <input type="checkbox"/> (248,249)          | <input type="checkbox"/> (370)                                     | <input type="checkbox"/> (338,396)  |   |                                 |   |
|   | <input type="checkbox"/> N.E.Maint          | <input type="checkbox"/> North H2SO4                               | <input type="checkbox"/> Maint. Shop  |   |                                 |   |
|   | <input type="checkbox"/> (251,412)          | <input type="checkbox"/> (359)                                     | <input type="checkbox"/> (221)  |   |                                 |   |
|   | <input type="checkbox"/> Rollover & Reclaim | <input checked="" type="checkbox"/> East H2SO4 <u>98%</u>          | <input type="checkbox"/> Shipping   |   |                                 |   |
|   | <input type="checkbox"/> (232,236)          | <input type="checkbox"/> (358)                                     | <input type="checkbox"/> (348)  |   |                                 |   |
|   | <input type="checkbox"/> E&I shop           | <input type="checkbox"/> Silica                                    | <input type="checkbox"/> NH3 Maint shop   |   |                                 |   |
|   | <input type="checkbox"/> (258,268)          | <input type="checkbox"/> (224,225,226)                             | <input type="checkbox"/> (423)  |   |                                 |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP                | <input type="checkbox"/> Front offices                             |   |   |                                 |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)              | <input type="checkbox"/> (0,266)                                   |   |   |                                 |   |
| <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere east or west                   |   |   |                                 |   |
| Nature of injuries  |   |  |   |   |                                 |   |
| <input checked="" type="checkbox"/> None  |   | <input type="checkbox"/> Thermal burn                              | <input type="checkbox"/> Laceration   |   |                                 |   |
| <input type="checkbox"/> Fall   |   | <input type="checkbox"/> Chemical burn                             | <input type="checkbox"/> Other  |   |                                 |   |
| Area of body affected   |   |  |   |   |                                 |   |
| <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms               | <input type="checkbox"/> Back                                      |   |   |                                 |   |
| <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands              | <input type="checkbox"/> Legs                                      |   |   |                                 |   |
| <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest              | <input type="checkbox"/> Feet                                      |   |   |                                 |   |
| Do we Need?   |   |  |   |   |                                 |   |
| <input type="checkbox"/> Ambulance  |   | <input type="checkbox"/> Evacuation                                | <input type="checkbox"/> Emergency Response Team  |   |                                 |   |
| <input type="checkbox"/> Other  |   | <input checked="" type="checkbox"/> None                           |   |   |                                 |   |
| Wind direction & speed  |   |  |   |   |                                 |   |
| Cross out area that the wind is coming from. This will tell where to send the people to.                              |   |  |   |   |                                 |   |
| Send to Zone _____ No wind send to Zone 3   |   |  |   |   |                                 |   |
| Filled out by <u>Lody Lowe</u>  |   |  | Visual check  |   |                                 |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  | <input type="checkbox"/> North to South<br><input checked="" type="checkbox"/> South to North<br><input type="checkbox"/> East to West<br><input type="checkbox"/> West to East |   |                                 |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 6-9-97

TIME 09:40

updated 3/11/87 2%

|  |  |  |   |   |  |   |
|--|--|--|---|---|--|---|
| <b>ANSWERED</b>  |  |  |   | Lab <input checked="" type="checkbox"/>   | Safety <input checked="" type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Rick Thomas</u>                      |  |  |   | Was 333 called? <u>yes</u>  |  |   |
| Nature of emergency  |  | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire   | <input checked="" type="checkbox"/> Release (amount <u>100 gal</u> )<br><input type="checkbox"/> Explosion <u>70% Diluted</u> | Number of people injured <u>NO</u>  |  |   |
| Detailed Comments: <u>9:15 Line broken during construction</u> |  |  |   |   |  |   |
| Area of emergency  | <input type="checkbox"/> Calciner<br>(397)               | <input type="checkbox"/> Phos<br>(345,371)   | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)   |   |  |   |
|  | <input type="checkbox"/> Wash Plant<br>(248,249)         | <input checked="" type="checkbox"/> SPA <u>2-51</u><br>(370)   | <input type="checkbox"/> Warehouse<br>(338,396)   |   |  |   |
|  | <input type="checkbox"/> N.E.Maint<br>(251,412)          | <input type="checkbox"/> North H2SO4<br>(359)  | <input type="checkbox"/> Maint. Shop<br>(221)   |   |  |   |
|  | <input type="checkbox"/> Rollover & Reclaim<br>(232,236) | <input type="checkbox"/> East H2SO4<br>(358)   | <input type="checkbox"/> Shipping<br>(348)  |   |  |   |
|  | <input type="checkbox"/> E&I shop<br>(258,268)           | <input type="checkbox"/> Silica<br>(224,225,226)   | <input type="checkbox"/> NH3 Maint shop<br>(423)  |   |  |   |
|  | <input type="checkbox"/> Ball Mill<br>(344)              | <input type="checkbox"/> DAP<br>(227)  | <input type="checkbox"/> Front offices<br>(0,266)   |   |  |   |
|  | <input type="checkbox"/> Pond                            |  | <input type="checkbox"/> NH3 Sphere<br>east or west   |   |  |   |
|  |  |  |   |   |  |   |
|  |  |  |   |   |  |   |
|  |  |  |   |   |  |   |
| Nature of injuries   |  | <input type="checkbox"/> None<br><input type="checkbox"/> Fall   | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other                           |  |   |
| Area of body affected  |  | <input type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head<br><input type="checkbox"/> Neck   | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest                             | <input type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet |  |   |
| Do we Need?  |  | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other   | <input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None   | Emergency Response Team   |  |   |
| Wind direction & speed   |  | MPH <u>0</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3       |   |   |  |   |
| Filled out by <u>London L. Thomas</u>                          |  | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.  |   |   |  |   |
|  |  |  |   |   |  |   |
| Visual check   |  | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |   |   |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist



# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 6-10-77

TIME 11:25

updated 3/11/97 2%

|   |   |  |  |   |
|---|---|--|--|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>  | Safety <input checked="" type="checkbox"/>           | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Brett Hughes</u>  |   |  | Was 333 called? <u>yes</u>                           |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input type="checkbox"/> Release (amount <u>6 tons</u> )   | Number of people injured <u>0</u>                    |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion <u>5.7%</u>   |  |   |
| Detailed Comments: <u>11:15 Transferring acid overflowed car</u>  |   |  |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner (397)   | <input type="checkbox"/> Phos (345,371) <u>N. Car Wash</u>   | <input type="checkbox"/> Chem bldg (212,413,301,210) |   |
|   | <input type="checkbox"/> Wash Plant (248,249)   | <input checked="" type="checkbox"/> SPA <u>K-58</u> (370)  | <input type="checkbox"/> Warehouse (338,398)         |   |
|   | <input type="checkbox"/> N.E. Maint (251,412)   | <input type="checkbox"/> North H2SO4 (359)   | <input type="checkbox"/> Maint. Shop (221)           |   |
|   | <input type="checkbox"/> Rollover & Reclaim (232,236)   | <input type="checkbox"/> East H2SO4 (358)  | <input type="checkbox"/> Shipping (348)              |   |
|   | <input type="checkbox"/> E&I shop (258,268)   | <input type="checkbox"/> Silica (224,225,226)  | <input type="checkbox"/> NH3 Maint shop (423)        |   |
|   | <input type="checkbox"/> Ball Mill (344)  | <input type="checkbox"/> DAP (227)   | <input type="checkbox"/> Front offices (0,266)       |   |
|   | <input type="checkbox"/> Pond   |  | <input type="checkbox"/> NH3 Sphere east or west     |   |
|   |   |  |  |   |
|   |   |  |  |   |
|   |   |  |  |   |
| Nature of Injuries  | <input type="checkbox"/> None   | <input type="checkbox"/> Thermal burn  | <input type="checkbox"/> Laceration                  |   |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Other                       |   |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                        |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands   | <input type="checkbox"/> Legs                        |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest   | <input type="checkbox"/> Feet                        |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation  | <input type="checkbox"/> Emergency Response Team     |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None   |  |   |
| Wind direction & speed  | MPH <u>3</u>  |  |  |   |
|   | Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <u>3</u> No wind send to Zone 3 |  |  |   |
| Filled out by <u>London Williams</u>  |   |  |  |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |  |   |
| Visual check  |   | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 6-24-97

TIME 05:55

updated 3/11/97 2%

|   |  |   |   |   |
|---|--|---|---|---|
| <b>ANSWERED</b>   |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>                         | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Randy Peterson</u>  |  | Was 333 called? <u>Yes</u>  |   |   |
| Nature of emergency   | <input type="checkbox"/> Accident  | <input checked="" type="checkbox"/> Release (amount <u>2000 gal</u> )   | Number of people injured <u>0</u>                       |   |
|   | <input type="checkbox"/> Fire  | <input type="checkbox"/> Explosion <u>Pond fire</u>   |   |   |
| Detailed Comments: _____  |  |   |   |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)   | <input type="checkbox"/> Phos<br>(345,371)  | <input type="checkbox"/> Chem bldg<br>(212,413,301,210) |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)   | <input type="checkbox"/> SPA<br>(370)   | <input type="checkbox"/> Warehouse<br>(338,396)         |   |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)  | <input type="checkbox"/> North H2SO4<br>(359)   | <input type="checkbox"/> Maint. Shop<br>(221)           |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)   | <input type="checkbox"/> East H2SO4<br>(358)  | <input type="checkbox"/> Shipping<br>(348)              |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)   | <input type="checkbox"/> Silica<br>(224,225,226)  | <input type="checkbox"/> NH3 Maint shop<br>(423)        |   |
|   | <input type="checkbox"/> Ball Mill<br>(344)  | <input checked="" type="checkbox"/> DAP<br>(227)  | <input type="checkbox"/> Front offices<br>(0,266)       |   |
|   | <input type="checkbox"/> Pond  | <u>Between Dap &amp; Phos</u>   | <input type="checkbox"/> NH3 Sphere<br>east or west     |   |
|   |  |   |   |   |
|   |  |   |   |   |
|   |  |   |   |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None   | <input type="checkbox"/> Thermal burn   | <input type="checkbox"/> Laceration                     |   |
|   | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Other                          |   |
| Area of body affected   | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms   | <input type="checkbox"/> Back                           |   |
|   | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands  | <input type="checkbox"/> Legs                           |   |
|   | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest  | <input type="checkbox"/> Feet                           |   |
| Do we Need?   | <input type="checkbox"/> Ambulance   | <input type="checkbox"/> Evacuation   | <input type="checkbox"/> Emergency Response Team        |   |
|   | <input type="checkbox"/> Other   | <input checked="" type="checkbox"/> None  |   |   |
| Wind direction & speed  | MPH <u>0</u> <u>180°</u>   |   |   |   |
|   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |   |   |   |
| Filled out by <u>Steve Mann</u>   |  |   |   |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |  |   |   |   |
| Visual check  |  | <input checked="" type="checkbox"/> North to South<br><input type="checkbox"/> South to North<br><input type="checkbox"/> East to West<br><input type="checkbox"/> West to East |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 6-29-97

TIME 0926

updated 3/11/97 2%

|   |  |   |  |   |
|---|--|---|--|---|
| <b>ANSWERED</b>   |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>                  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Randy Peterson</u>  |  | Was 333 called? <u>Y.P.S.</u>   |  |   |
| Nature of emergency   | <input type="checkbox"/> Accident  | <input checked="" type="checkbox"/> Release (amount <u>98%</u> )  | Number of people injured <u>0</u>                |   |
|   | <input type="checkbox"/> Fire  | <input type="checkbox"/> Explosion  |  |   |
| Detailed Comments: <u>3 or 4 gals.</u>  |  |   |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner  | <input type="checkbox"/> Phos   | <input type="checkbox"/> Chem bldg               |   |
|   | <input type="checkbox"/> (397)   | <input type="checkbox"/> (345,371)  | <input type="checkbox"/> (212,413,301,210)       |   |
|   | <input type="checkbox"/> Wash Plant  | <input type="checkbox"/> SPA  | <input type="checkbox"/> Warehouse               |   |
|   | <input type="checkbox"/> (248,249)   | <input type="checkbox"/> (370)  | <input type="checkbox"/> (338,396)               |   |
|   | <input type="checkbox"/> N.E. Maint  | <input type="checkbox"/> North H2SO4  | <input type="checkbox"/> Maint. Shop             |   |
|   | <input type="checkbox"/> (251,412)   | <input type="checkbox"/> (359)  | <input type="checkbox"/> (221)                   |   |
|   | <input type="checkbox"/> Rollover & Reclaim  | <input checked="" type="checkbox"/> East H2SO4  | <input type="checkbox"/> Shipping                |   |
|   | <input type="checkbox"/> (232,236)   | <input type="checkbox"/> (358)  | <input type="checkbox"/> (348)                   |   |
|   | <input type="checkbox"/> E&I shop  | <input type="checkbox"/> Silica   | <input type="checkbox"/> NH3 Maint shop          |   |
|   | <input type="checkbox"/> (258,268)   | <input type="checkbox"/> (224,225,226)  | <input type="checkbox"/> (423)                   |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP   | <input type="checkbox"/> Front offices  |  |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)   | <input type="checkbox"/> (0,266)  |  |   |
| <input type="checkbox"/> Pond   |  | <input type="checkbox"/> NH3 Sphere   |  |   |
| <input type="checkbox"/> east or west   |  |   |  |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None   | <input type="checkbox"/> Thermal burn   | <input type="checkbox"/> Laceration              |   |
|   | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Other                   |   |
| Area of body affected   | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms   | <input type="checkbox"/> Back                    |   |
|   | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands  | <input type="checkbox"/> Legs                    |   |
|   | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest  | <input type="checkbox"/> Feet                    |   |
| Do we Need?   | <input type="checkbox"/> Ambulance   | <input type="checkbox"/> Evacuation   | <input type="checkbox"/> Emergency Response Team |   |
|   | <input type="checkbox"/> Other   | <input checked="" type="checkbox"/> None  |  |   |
| Wind direction & speed  | MPH <u>12</u>  |   |  |   |
|   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |   |  |   |
| Filled out by: <u>Lois Lowe</u>   |  |   |  |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |  |   |  |   |
| Visual check  |  | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input checked="" type="checkbox"/> South to North <input type="checkbox"/> West to East |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 7-13-97

TIME 0937

updated 3/11/97 2%

|   |   |  |  |   |
|---|---|--|--|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>                  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Derry Moore</u>   |   | Was 333 called? <u>Yes</u>   |  |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input checked="" type="checkbox"/> Release (amount <u>500 gals</u> )  | Number of people injured <u>0</u>                |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion   |  |   |
| Detailed Comments: <u>500 gal 98% to</u>  |   |  |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner   | <input type="checkbox"/> Phos  | <input type="checkbox"/> Chem bldg               |   |
|   | <input type="checkbox"/> (397)  | <input type="checkbox"/> (345,371)   | <input type="checkbox"/> (212,413,301,210)       |   |
|   | <input type="checkbox"/> Wash Plant   | <input type="checkbox"/> SPA   | <input type="checkbox"/> Warehouse               |   |
|   | <input type="checkbox"/> (248,249)  | <input type="checkbox"/> (370)   | <input type="checkbox"/> (338,396)               |   |
|   | <input type="checkbox"/> N.E. Maint   | <input type="checkbox"/> North H2SO4   | <input type="checkbox"/> Maint. Shop             |   |
|   | <input type="checkbox"/> (251,412)  | <input type="checkbox"/> (359)   | <input type="checkbox"/> (221)                   |   |
|   | <input type="checkbox"/> Rollover & Reclaim   | <input checked="" type="checkbox"/> East H2SO4   | <input type="checkbox"/> Shipping                |   |
|   | <input type="checkbox"/> (232,236)  | <input type="checkbox"/> (358)   | <input type="checkbox"/> (348)                   |   |
|   | <input type="checkbox"/> E&I shop   | <input type="checkbox"/> Silica  | <input type="checkbox"/> NH3 Maint shop          |   |
|   | <input type="checkbox"/> (258,268)  | <input type="checkbox"/> (224,225,226)   | <input type="checkbox"/> (423)                   |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP  | <input type="checkbox"/> Front offices   |  |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)  | <input type="checkbox"/> (0,266)   |  |   |
| <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere east or west   |  |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None  | <input type="checkbox"/> Thermal burn  | <input type="checkbox"/> Laceration              |   |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Other                   |   |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                    |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands   | <input type="checkbox"/> Legs                    |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest   | <input type="checkbox"/> Feet                    |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation  | <input type="checkbox"/> Emergency Response Team |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None   |  |   |
| Wind direction & speed  | MPH <u>0</u>  |  |  |   |
|   | Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |  |  |   |
| Filled out by <u>Cady Lowe</u>  |   |  |  |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |  |   |
| Visual check  |   | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

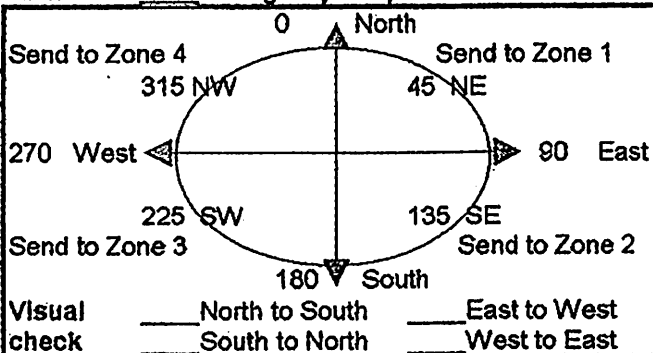
Agrium CPO

DATE 7-21-97

TIME 1407

updated 3/11/97 2%

|   |   |  |   |   |  |   |
|---|---|--|---|---|--|---|
| <b>ANSWERED</b>   |   |  |   | Lab <input checked="" type="checkbox"/> | Safety <input checked="" type="checkbox"/> | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Wayne Kies</u>  |   |  |   | Was 333 called? <u>Yes</u>              |  |   |
| Nature of emergency   |   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire | <input checked="" type="checkbox"/> Release (amount <u>H2SO4</u> )<br><input type="checkbox"/> Explosion <u>20-30 gal</u> | Number of people injured <u>932</u>     |  |   |
| Detailed Comments: _____  |   |  |   |   |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner   | <input type="checkbox"/> Phos                                      | <input type="checkbox"/> Chem bldg  |   |  |   |
|   | <input type="checkbox"/> (397)  | <input type="checkbox"/> (345,371)                                 | <input type="checkbox"/> (212,413,301,210)  |   |  |   |
|   | <input type="checkbox"/> Wash Plant   | <input type="checkbox"/> SPA                                       | <input type="checkbox"/> Warehouse  |   |  |   |
|   | <input type="checkbox"/> (248,249)  | <input type="checkbox"/> (370)                                     | <input type="checkbox"/> (338,396)  |   |  |   |
|   | <input type="checkbox"/> N.E.Maint  | <input type="checkbox"/> North H2SO4                               | <input type="checkbox"/> Maint. Shop  |   |  |   |
|   | <input type="checkbox"/> (251,412)  | <input type="checkbox"/> (359)                                     | <input type="checkbox"/> (221)  |   |  |   |
|   | <input type="checkbox"/> Rollover & Reclaim   | <input checked="" type="checkbox"/> East H2SO4                     | <input type="checkbox"/> Shipping   |   |  |   |
|   | <input type="checkbox"/> (232,236)  | <input type="checkbox"/> (358)                                     | <input type="checkbox"/> (348)  |   |  |   |
|   | <input type="checkbox"/> E&I shop   | <input type="checkbox"/> Silica                                    | <input type="checkbox"/> NH3 Maint shop   |   |  |   |
|   | <input type="checkbox"/> (258,268)  | <input type="checkbox"/> (224,225,226)                             | <input type="checkbox"/> (423)  |   |  |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP  | <input type="checkbox"/> Front offices                             |   |   |  |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)  | <input type="checkbox"/> (0,266)                                   |   |   |  |   |
| <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere                                |   |   |  |   |
|   |   | <input type="checkbox"/> east or west                              |   |   |  |   |
| Nature of injuries  | <input type="checkbox"/> None   | <input type="checkbox"/> Thermal burn                              | <input type="checkbox"/> Laceration   |   |  |   |
|   | <u>NA</u>   | <input type="checkbox"/> Chemical burn                             | <input type="checkbox"/> Other  |   |  |   |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms                                      | <input type="checkbox"/> Back   |   |  |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands                                     | <input type="checkbox"/> Legs   |   |  |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest                                     | <input type="checkbox"/> Feet   |   |  |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation                                | <input type="checkbox"/> Emergency Response Team  |   |  |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None                           |   |   |  |   |
| Wind direction & speed  | MPH <u>NONE</u>   |  |   |   |  |   |
|   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>3</u> No wind send to Zone 3 |  |   |   |  |   |
| Filled out by <u>Howard E. Johnson Jr.</u>  |   |  |   |   |  |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |   |   |  |   |



Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 7-28-97

TIME 0149

updated 3/11/97 2%

|                                    |   |   |   |   |
|------------------------------------|---|---|---|---|
| <b>ANSWERED</b>                    |   | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>   | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Clay</u> |   | Was 333 called? <u>yes</u>  |   |   |
| Nature of emergency                | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  | <input checked="" type="checkbox"/> Release (amount <u>1.10</u> )<br><input type="checkbox"/> Explosion   | Number of people injured _____  |   |
| Detailed Comments: _____           |   |   |   |   |
| Area of emergency                  | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E.Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos<br>(345,371)<br><input checked="" type="checkbox"/> SPA <u>TK 51</u><br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |   |
| Nature of Injuries                 | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other   |   |   |   |
| Area of body affected              | <input checked="" type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back<br><input checked="" type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs<br><input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet                              |   |   |   |
| Do we Need?                        | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input checked="" type="checkbox"/> None  |   |   |   |
| Wind direction & speed             | 45° MPH <u>0</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>1</u> No wind send to Zone 3   |   |   |   |
| Filled out by <u>Clay Gentry</u>   | As soon as the caller hangs up, they must come to the lab to guide the first aid people to the scene of the accident.   |   |   |   |
|                                    |   |   |   |   |
|                                    |   | Visual check <input checked="" type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East  |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 7-28-97

TIME 0947

updated 3/11/97 2%

|   |  |   |   |   |
|---|--|---|---|---|
| <b>ANSWERED</b>   |  | Lab <input checked="" type="checkbox"/>   | Safety <input checked="" type="checkbox"/>  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Dora Harris</u>               |  | Was 333 called? <u>Yes</u>  |   |   |
| Nature of emergency                                     | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire   | <input checked="" type="checkbox"/> Release (amount _____)<br><input type="checkbox"/> Explosion  | Number of people injured <u>0</u>   |   |
| Detailed Comments: <u>7070 5 gal cleaned up already</u> |  |   |   |   |
| Area of emergency                                       | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E. Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input checked="" type="checkbox"/> Phos <u>North West corner on Road</u><br>(345,371)<br><input type="checkbox"/> SPA<br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |   |
| Nature of injuries                                      | <input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other  |   |   |   |
| Area of body affected                                   | <input type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back<br><input type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs<br><input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet   |   |   |   |
| Do we Need?   | <input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input checked="" type="checkbox"/> None   |   |   |   |
| Wind direction & speed                                  | MPH <u>4</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3   |   |   |   |
| Filled out by <u>Cady Lowe</u>                          | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.  |   |   |   |
| Visual check  |  | <div style="display: flex; justify-content: space-between;"> <div>           Send to Zone 4<br/>315 NW<br/>270 West<br/>225 SW<br/>Send to Zone 3         </div> <div>           Send to Zone 1<br/>45 NE<br/>90 East<br/>135 SE<br/>Send to Zone 2<br/>180 South         </div> </div>                                       |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

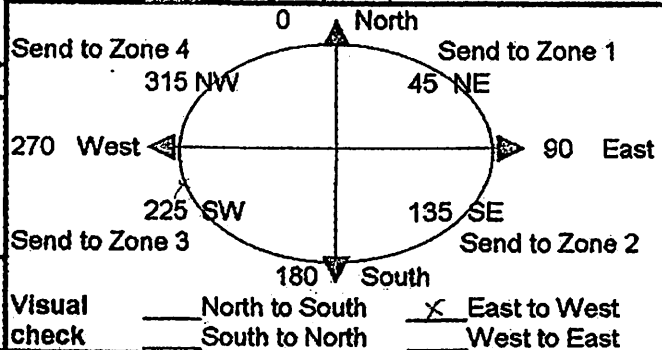
Agrium CPO

DATE 8-19-97

TIME 1550

updated 3/11/97 2%

|   |   |  |   |
|---|---|--|---|
| <b>ANSWERED</b>   |   |  |   |
| Lab   | <input checked="" type="checkbox"/>   | Safety   | <input checked="" type="checkbox"/>   |
| Guard   | <input checked="" type="checkbox"/>   |  |   |
| Name of person calling <u>Bret Hyman</u>                            |   | Was 333 called?  |   |
| Nature of emergency   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  | <input checked="" type="checkbox"/> Release (amount <u>60 gal 93%</u> )<br><input type="checkbox"/> Explosion <u>112504</u>  | Number of people injured  |
| Detailed Comments: <u>Leak in 93% Truck unloading line by TK#26</u> |   |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E.Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input checked="" type="checkbox"/> Phos<br>(345,371)<br><input type="checkbox"/> SPA<br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |
| Nature of injuries  | <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall   | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other   |
| Area of body affected   | <input type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head<br><input type="checkbox"/> Neck  | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest  | <input type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet   |
| Do we Need?   | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other  | <input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None  | <input type="checkbox"/> Emergency Response Team  |
| Wind direction & speed  | MPH <u>6</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>3</u> No wind send to Zone 3   |  |   |
| Filled out by   | <u>Howard Johnson Jr.</u><br>As soon as the caller hangs up, they must come to the lab to guide the first aid people to the scene of the accident.  |  |   |



Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist



# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 9-1-97

TIME 0817

updated 3/11/97 2%

|  |   |  |   |   |
|--|---|--|---|---|
| <b>ANSWERED</b>                            |   | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>   | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>SCOTT Nelson</u> |   | Was 333 called? <u>yes</u>   |   |   |
| Nature of emergency                        | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire  | <input checked="" type="checkbox"/> Release (amount <u>50 gal</u> )<br><input type="checkbox"/> Explosion <u>52%</u>   | Number of people injured _____  |   |
| Detailed Comments: _____                   |   |  |   |   |
| Area of emergency                          | <input type="checkbox"/> Calciner<br>(397)<br><input type="checkbox"/> Wash Plant<br>(248,249)<br><input type="checkbox"/> N.E.Maint<br>(251,412)<br><input type="checkbox"/> Rollover & Reclaim<br>(232,236)<br><input type="checkbox"/> E&I shop<br>(258,268)<br><input type="checkbox"/> Ball Mill<br>(344)<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos<br>(345,371)<br><input checked="" type="checkbox"/> SPA <u>North cas Wash</u><br>(370)<br><input type="checkbox"/> North H2SO4<br>(359)<br><input type="checkbox"/> East H2SO4<br>(358)<br><input type="checkbox"/> Silica<br>(224,225,226)<br><input type="checkbox"/> DAP<br>(227) | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)<br><input type="checkbox"/> Warehouse<br>(338,396)<br><input type="checkbox"/> Maint. Shop<br>(221)<br><input type="checkbox"/> Shipping<br>(348)<br><input type="checkbox"/> NH3 Maint shop<br>(423)<br><input type="checkbox"/> Front offices<br>(0,266)<br><input type="checkbox"/> NH3 Sphere<br>east or west |   |
| Nature of injuries                         | <u>N/A</u> <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall  | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other   |   |
| Area of body affected                      | <input type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head<br><input type="checkbox"/> Neck  | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest  | <u>N/A</u> <input checked="" type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet   |   |
| Do we Need?                                | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other  | <input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None  | <input checked="" type="checkbox"/> Emergency Response Team   |   |
| Wind direction & speed                     | MPH <u>0</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3  |  |   |   |
| Filled out by _____                        | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  |   |   |
| Visual check                               |   | _____ North to South<br>_____ South to North<br>_____ East to West<br>_____ West to East   |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 9-1-97

TIME 12:26

updated 3/11/87 2%

|   |  |   |   |   |
|---|--|---|---|---|
| <b>ANSWERED</b>   |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>                         | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>EAST H2SO4</u>  |  | Was 333 called? <u>yes</u>  |   |   |
| Nature of emergency   | <input type="checkbox"/> Accident                        | <input checked="" type="checkbox"/> Release (amount <u>200 to</u> )   |   | Number of people injured <u>None</u>      |
|   | <input type="checkbox"/> Fire                            | <input type="checkbox"/> Explosion  |   |   |
| Detailed Comments: <u>93% H2SO4</u>   |  |   |   |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)               | <input type="checkbox"/> Phos<br>(345,371)  | <input type="checkbox"/> Chem bldg<br>(212,413,301,210) |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)         | <input type="checkbox"/> SPA<br>(370)   | <input type="checkbox"/> Warehouse<br>(338,396)         |   |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)          | <input type="checkbox"/> North H2SO4<br>(359)   | <input type="checkbox"/> Maint. Shop<br>(221)           |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236) | <input checked="" type="checkbox"/> East H2SO4<br>(358)   | <input type="checkbox"/> Shipping<br>(348)              |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)           | <input type="checkbox"/> Silica<br>(224,225,226)  | <input type="checkbox"/> NH3 Maint shop<br>(423)        |   |
|   | <input type="checkbox"/> Ball Mill<br>(344)              | <input type="checkbox"/> DAP<br>(227)   | <input type="checkbox"/> Front offices<br>(0,266)       |   |
|   | <input type="checkbox"/> Pond                            |   | <input type="checkbox"/> NH3 Sphere<br>east or west     |   |
|   |  |   |   |   |
|   |  |   |   |   |
|   |  |   |   |   |
|   |  |   |   |   |
|   | Nature of injuries                                       |   |   |   |
| <input type="checkbox"/> None <u>N/A</u> <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other   |  |   |   |   |
| Area of body affected   |  |   |   |   |
| <input type="checkbox"/> Eyes <u>N/A</u> <input type="checkbox"/> Arms <input type="checkbox"/> Back<br><input type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs<br><input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet |  |   |   |   |
| Do we Need?   |  |   |   |   |
| <input type="checkbox"/> Ambulance <u>N/A</u> <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input type="checkbox"/> None  |  |   |   |   |
| Wind direction & speed  |  |   |   |   |
| MPH <u>8</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>160</u> . No wind send to Zone 3   |  |   |   |   |
| Filled out by <u>JTH</u>  |  | Visual check  |   |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  | <input checked="" type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 9-24-97

TIME 09:07

updated 3/11/97 2%

|   |   |  |  |   |
|---|---|--|--|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/>                  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>ERIC HART</u>   |   | Was 333 called? <input checked="" type="checkbox"/>  |  |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input checked="" type="checkbox"/> Release (amount <u>?</u> )   | Number of people injured <u>0</u>                |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion   |  |   |
| Detailed Comments: <u>Sulfuric is leaking from piping by Tank 27</u>  |   |  |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner   | <input checked="" type="checkbox"/> Phos <u>K-27</u>   | <input type="checkbox"/> Chem bldg               |   |
|   | <input type="checkbox"/> (397)  | <input type="checkbox"/> (345,371) <u>554</u>  | <input type="checkbox"/> (212,413,301,210)       |   |
|   | <input type="checkbox"/> Wash Plant   | <input type="checkbox"/> SPA   | <input type="checkbox"/> Warehouse               |   |
|   | <input type="checkbox"/> (248,249)  | <input type="checkbox"/> (370)   | <input type="checkbox"/> (338,396)               |   |
|   | <input type="checkbox"/> N.E.Maint  | <input type="checkbox"/> North H2SO4   | <input type="checkbox"/> Maint. Shop             |   |
|   | <input type="checkbox"/> (251,412)  | <input type="checkbox"/> (359)   | <input type="checkbox"/> (221)                   |   |
|   | <input type="checkbox"/> Rollover & Reclaim   | <input type="checkbox"/> East H2SO4  | <input type="checkbox"/> Shipping                |   |
|   | <input type="checkbox"/> (232,236)  | <input type="checkbox"/> (358)   | <input type="checkbox"/> (348)                   |   |
|   | <input type="checkbox"/> E&I shop   | <input type="checkbox"/> Silica  | <input type="checkbox"/> NH3 Maint shop          |   |
|   | <input type="checkbox"/> (258,268)  | <input type="checkbox"/> (224,225,226)   | <input type="checkbox"/> (423)                   |   |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP  | <input type="checkbox"/> Front offices   |  |   |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)  | <input type="checkbox"/> (0,266)   |  |   |
| <input type="checkbox"/> Pond   |   | <input type="checkbox"/> NH3 Sphere east or west   |  |   |
| Nature of injuries  | <input type="checkbox"/> None   | <input type="checkbox"/> Thermal burn  | <input type="checkbox"/> Laceration              |   |
|   | <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Other                   |   |
| Area of body affected   | <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                    |   |
|   | <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands   | <input type="checkbox"/> Legs                    |   |
|   | <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest   | <input type="checkbox"/> Feet                    |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation  | <input type="checkbox"/> Emergency Response Team |   |
|   | <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None   |  |   |
| Wind direction & speed  | MPH <u>0</u>  |  |  |   |
|   | Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |  |  |   |
| Filled out by <u>London B. Williams</u>   |   |  |  |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |  |   |
| Visual check  |   | <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tipples, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 10/5/97

TIME 1618

updated 3/11/97 2%

|   |   |  |                                 |   |   |   |  |
|---|---|--|---------------------------------|---|---|---|--|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>  | Safety <input type="checkbox"/> | Guard <input checked="" type="checkbox"/> |   |   |  |
| Name of person calling <u>Conan Lewis</u>   |   |  | Was 333 called? <u>yes</u>      |   |   |   |  |
| Nature of emergency   |   | <input type="checkbox"/> Accident <input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Release (amount <u>60 gal</u> ) <input type="checkbox"/> Explosion<br>Number of people injured <u>1</u>   |                                 |   |   |   |  |
| Detailed Comments: <u>Leak on Pipe Rack in front of old West Sulfuric</u>   |   |  |                                 |   |   |   |  |
| <table border="0" style="width:100%;"> <tr> <td style="width:33%;"> <b>Area of emergency</b><br/> <input type="checkbox"/> Calciner (397)<br/> <input type="checkbox"/> Wash Plant (248,249)<br/> <input type="checkbox"/> N.E.Maint (251,412)<br/> <input type="checkbox"/> Rollover &amp; Reclaim (232,236)<br/> <input type="checkbox"/> E&amp;I shop (258,268)<br/> <input type="checkbox"/> Ball Mill (344)<br/> <input type="checkbox"/> Pond             </td> <td style="width:33%;"> <input type="checkbox"/> Phos (345,371)<br/> <input type="checkbox"/> SPA (370)<br/> <input type="checkbox"/> North H2SO4 (359)<br/> <input type="checkbox"/> East H2SO4 (358)<br/> <input type="checkbox"/> Silica (224,225,226)<br/> <input type="checkbox"/> DAP (227)             </td> <td style="width:33%;"> <input type="checkbox"/> Chem bldg (212,413,301,210)<br/> <input type="checkbox"/> Warehouse (338,398)<br/> <input type="checkbox"/> Maint. Shop (221)<br/> <input type="checkbox"/> Shipping (348)<br/> <input type="checkbox"/> NH3 Maint shop (423)<br/> <input type="checkbox"/> Front offices (0,268)<br/> <input type="checkbox"/> NH3 Sphere east or west             </td> </tr> </table> |   |  |                                 |   | <b>Area of emergency</b><br><input type="checkbox"/> Calciner (397)<br><input type="checkbox"/> Wash Plant (248,249)<br><input type="checkbox"/> N.E.Maint (251,412)<br><input type="checkbox"/> Rollover & Reclaim (232,236)<br><input type="checkbox"/> E&I shop (258,268)<br><input type="checkbox"/> Ball Mill (344)<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos (345,371)<br><input type="checkbox"/> SPA (370)<br><input type="checkbox"/> North H2SO4 (359)<br><input type="checkbox"/> East H2SO4 (358)<br><input type="checkbox"/> Silica (224,225,226)<br><input type="checkbox"/> DAP (227) | <input type="checkbox"/> Chem bldg (212,413,301,210)<br><input type="checkbox"/> Warehouse (338,398)<br><input type="checkbox"/> Maint. Shop (221)<br><input type="checkbox"/> Shipping (348)<br><input type="checkbox"/> NH3 Maint shop (423)<br><input type="checkbox"/> Front offices (0,268)<br><input type="checkbox"/> NH3 Sphere east or west |
| <b>Area of emergency</b><br><input type="checkbox"/> Calciner (397)<br><input type="checkbox"/> Wash Plant (248,249)<br><input type="checkbox"/> N.E.Maint (251,412)<br><input type="checkbox"/> Rollover & Reclaim (232,236)<br><input type="checkbox"/> E&I shop (258,268)<br><input type="checkbox"/> Ball Mill (344)<br><input type="checkbox"/> Pond   | <input type="checkbox"/> Phos (345,371)<br><input type="checkbox"/> SPA (370)<br><input type="checkbox"/> North H2SO4 (359)<br><input type="checkbox"/> East H2SO4 (358)<br><input type="checkbox"/> Silica (224,225,226)<br><input type="checkbox"/> DAP (227) | <input type="checkbox"/> Chem bldg (212,413,301,210)<br><input type="checkbox"/> Warehouse (338,398)<br><input type="checkbox"/> Maint. Shop (221)<br><input type="checkbox"/> Shipping (348)<br><input type="checkbox"/> NH3 Maint shop (423)<br><input type="checkbox"/> Front offices (0,268)<br><input type="checkbox"/> NH3 Sphere east or west |                                 |   |   |   |  |
| <b>Nature of injuries</b><br><input checked="" type="checkbox"/> None <input type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration<br><input type="checkbox"/> Fall <input type="checkbox"/> Chemical burn <input type="checkbox"/> Other  |   |  |                                 |   |   |   |  |
| <b>Area of body affected</b><br><input checked="" type="checkbox"/> Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back<br><input type="checkbox"/> Face & head <input type="checkbox"/> Hands <input type="checkbox"/> Legs<br><input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet   |   |  |                                 |   |   |   |  |
| <b>Do we Need?</b><br><input type="checkbox"/> Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> Emergency Response Team<br><input type="checkbox"/> Other <input checked="" type="checkbox"/> None  |   |  |                                 |   |   |   |  |
| <b>Wind direction &amp; speed</b><br>MPH <u>10 mph</u><br>Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone <u>3</u> <input checked="" type="checkbox"/> No wind send to Zone 3   |   | <p>Visual check: <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br/> <input type="checkbox"/> South to North <input type="checkbox"/> West to East</p>  |                                 |   |   |   |  |
| Filled out by <u>Anthony W. [Signature]</u><br>As soon as the caller hangs up, they must come to the lab to guide the first aid people to the scene of the accident.  |   |  |                                 |   |   |   |  |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

## Agrium CPO

TIME 03:33

updated 3/11/97 2%

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Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 10-31-97

TIME 21:12

updated 3/11/97 2%

|   |  |  |   |   |
|---|--|--|---|---|
| <b>ANSWERED</b>                                 |  | Lab <input checked="" type="checkbox"/>                              | Safety <input type="checkbox"/>                         | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Clare Christensen</u> |  | Was 333 called? <u>yes</u>   |   |   |
| Nature of emergency                             | <input type="checkbox"/> Accident  | <input checked="" type="checkbox"/> Release (amount <u>100 gal</u> ) | Number of people injured <u>0</u>                       |   |
|   | <input type="checkbox"/> Fire  | <input type="checkbox"/> Explosion <u>52%</u>                        |   |   |
| Detailed Comments: _____                        |  |  |   |   |
| Area of emergency                               | <input type="checkbox"/> Calciner<br>(397)   | <input checked="" type="checkbox"/> Phos <u>2.5h</u><br>(345,371)    | <input type="checkbox"/> Chem bldg<br>(212,413,301,210) |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)   | <input type="checkbox"/> SPA<br>(370)                                | <input type="checkbox"/> Warehouse<br>(338,396)         |   |
|   | <input type="checkbox"/> N.E.Maint<br>(251,412)  | <input type="checkbox"/> North H2SO4<br>(359)                        | <input type="checkbox"/> Maint. Shop<br>(221)           |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)   | <input type="checkbox"/> East H2SO4<br>(358)                         | <input type="checkbox"/> Shipping<br>(348)              |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)   | <input type="checkbox"/> Silica<br>(224,225,226)                     | <input type="checkbox"/> NH3 Maint shop<br>(423)        |   |
|   | <input type="checkbox"/> Ball Mill<br>(344)  | <input type="checkbox"/> DAP<br>(227)                                | <input type="checkbox"/> Front offices<br>(0,266)       |   |
|   | <input type="checkbox"/> Pond  |  | <input type="checkbox"/> NH3 Sphere<br>east or west     |   |
|   |  |  |   |   |
|   |  |  |   |   |
|   |  |  |   |   |
| Nature of injuries                              | <input checked="" type="checkbox"/> None   | <input type="checkbox"/> Thermal burn                                | <input type="checkbox"/> Laceration                     |   |
|   | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn                               | <input type="checkbox"/> Other                          |   |
| Area of body affected                           | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back                           |   |
|   | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands                                       | <input type="checkbox"/> Legs                           |   |
|   | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest                                       | <input type="checkbox"/> Feet                           |   |
| Do we Need?                                     | <input type="checkbox"/> Ambulance   | <input type="checkbox"/> Evacuation                                  | <input type="checkbox"/> Emergency Response Team        |   |
|   | <input type="checkbox"/> Other   | <input checked="" type="checkbox"/> None                             |   |   |
| Wind direction & speed                          | MPH <u>1</u>   |  |   |   |
|   | Cross out area that the wind is coming from.<br>This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |  |   |   |
| Filled out by <u>London Williams</u>            |  |  |   |   |
|   |  |  |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 11-14-97

TIME 09 21

updated 3/11/97 2%

|   |  |   |  |   |
|---|--|---|--|---|
| ANSWERED  |  | Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>  | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>Ross Loucher</u>  |  | Was 333 called? <u>yes</u>  |  |   |
| Nature of emergency   | <input type="checkbox"/> Accident<br><input type="checkbox"/> Fire   | <input checked="" type="checkbox"/> Release (amount <u>85 gals.</u> )<br><input type="checkbox"/> Explosion <u>70% acid</u>   | Number of people injured <u>0</u>  |   |
| Detailed Comments: <u>Spill was located near car load out area in containment area.</u> |  |   |  |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br><input type="checkbox"/> Wash Plant<br><input type="checkbox"/> N.E. Maint<br><input type="checkbox"/> Rollover & Reclaim<br><input type="checkbox"/> E&I shop<br><input type="checkbox"/> Ball Mill<br><input type="checkbox"/> Pond | <input type="checkbox"/> Phos<br><input type="checkbox"/> SPA<br><input type="checkbox"/> North H2SO4<br><input type="checkbox"/> East H2SO4<br><input type="checkbox"/> Silica<br><input type="checkbox"/> DAP | <input type="checkbox"/> Chem bldg<br><input type="checkbox"/> Warehouse<br><input type="checkbox"/> Maint. Shop<br><input type="checkbox"/> Shipping<br><input type="checkbox"/> NH3 Maint shop<br><input type="checkbox"/> Front offices<br><input type="checkbox"/> NH3 Sphere<br><input type="checkbox"/> east or west |   |
| Nature of injuries  | <input checked="" type="checkbox"/> None<br><input type="checkbox"/> Fall  | <input type="checkbox"/> Thermal burn<br><input type="checkbox"/> Chemical burn   | <input type="checkbox"/> Laceration<br><input type="checkbox"/> Other  |   |
| Area of body affected   | <input type="checkbox"/> Eyes<br><input type="checkbox"/> Face & head<br><input type="checkbox"/> Neck   | <input type="checkbox"/> Arms<br><input type="checkbox"/> Hands<br><input type="checkbox"/> Chest   | <input type="checkbox"/> Back<br><input type="checkbox"/> Legs<br><input type="checkbox"/> Feet  |   |
| Do we Need?   | <input type="checkbox"/> Ambulance<br><input type="checkbox"/> Other   | <input type="checkbox"/> Evacuation<br><input checked="" type="checkbox"/> None   | Emergency Response Team  |   |
| Wind direction & speed  | MPH <u>calm</u><br>Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone <u>          </u> No wind send to Zone 3   |   |  |   |
| Filled out by <u>D. Maughan</u>   |  | As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident.   |  |   |
|   |  | Visual check<br><input type="checkbox"/> North to South<br><input type="checkbox"/> South to North<br><input type="checkbox"/> East to West<br><input type="checkbox"/> West to East                            |  |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 12-4-97

TIME 0425

updated 3/11/97 2%

|   |  |   |  |                                |
|---|--|---|--|--------------------------------|
| <b>ANSWERED</b>   |  | Lab <input checked="" type="checkbox"/>   | Safety <input checked="" type="checkbox"/>                   | Guard <input type="checkbox"/> |
| Name of person calling <u>Randy Peterson</u>  |  | Was 333 called? <input checked="" type="checkbox"/>   |  |                                |
| Nature of emergency   | <input type="checkbox"/> Accident  | <input checked="" type="checkbox"/> Release (amount <u>          </u> )   | Number of people injured <input checked="" type="checkbox"/> |                                |
|   | <input type="checkbox"/> Fire  | <input type="checkbox"/> Explosion  |  |                                |
| Detailed Comments: <u>H2SO4 93%.</u>  |  |   |  |                                |
| Area of emergency   | <input type="checkbox"/> Calciner  | <input type="checkbox"/> Phos   | <input type="checkbox"/> Chem bldg                           |                                |
|   | <input type="checkbox"/> (397)   | <input type="checkbox"/> (345,371)  | <input type="checkbox"/> (212,413,301,210)                   |                                |
|   | <input type="checkbox"/> Wash Plant  | <input type="checkbox"/> SPA  | <input type="checkbox"/> Warehouse                           |                                |
|   | <input type="checkbox"/> (248,249)   | <input type="checkbox"/> (370)  | <input type="checkbox"/> (338,396)                           |                                |
|   | <input type="checkbox"/> N.E. Maint  | <input type="checkbox"/> North H2SO4  | <input type="checkbox"/> Maint. Shop                         |                                |
|   | <input type="checkbox"/> (251,412)   | <input type="checkbox"/> (359)  | <input type="checkbox"/> (221)                               |                                |
|   | <input type="checkbox"/> Rollover & Reclaim  | <input type="checkbox"/> East H2SO4   | <input type="checkbox"/> Shipping                            |                                |
|   | <input type="checkbox"/> (232,236)   | <input type="checkbox"/> (358)  | <input type="checkbox"/> (348)                               |                                |
|   | <input type="checkbox"/> E&I shop  | <input type="checkbox"/> Silica   | <input type="checkbox"/> NH3 Maint shop                      |                                |
|   | <input type="checkbox"/> (258,268)   | <input type="checkbox"/> (224,225,226)  | <input type="checkbox"/> (423)                               |                                |
| <input type="checkbox"/> Ball Mill  | <input type="checkbox"/> DAP   | <input type="checkbox"/> Front offices  |  |                                |
| <input type="checkbox"/> (344)  | <input type="checkbox"/> (227)   | <input type="checkbox"/> (0,266)  |  |                                |
| <input type="checkbox"/> Pond   | <input checked="" type="checkbox"/> <u>West H2SO4</u>  | <input type="checkbox"/> NH3 Sphere east or west  |  |                                |
| Nature of injuries  | <input type="checkbox"/> None  | <input type="checkbox"/> Thermal burn   | <input type="checkbox"/> Laceration                          |                                |
|   | <input type="checkbox"/> Fall  | <input type="checkbox"/> Chemical burn  | <input type="checkbox"/> Other                               |                                |
| Area of body affected   | <input type="checkbox"/> Eyes  | <input type="checkbox"/> Arms   | <input type="checkbox"/> Back                                |                                |
|   | <input type="checkbox"/> Face & head   | <input type="checkbox"/> Hands  | <input type="checkbox"/> Legs                                |                                |
|   | <input type="checkbox"/> Neck  | <input type="checkbox"/> Chest  | <input type="checkbox"/> Feet                                |                                |
| Do we Need?   | <input type="checkbox"/> Ambulance   | <input type="checkbox"/> Evacuation   | <input type="checkbox"/> Emergency Response Team             |                                |
|   | <input type="checkbox"/> Other   | <input type="checkbox"/> None   |  |                                |
| Wind direction & speed  | MPH <u>          </u>  |   |  |                                |
|   | Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <u>          </u> No wind send to Zone 3 |   |  |                                |
| Filled out by <u>Cody Lowe</u>  |  | Visual check <input type="checkbox"/> North to South <input type="checkbox"/> East to West<br><input type="checkbox"/> South to North <input type="checkbox"/> West to East |  |                                |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |  |   |  |                                |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist



# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 12-5-97

TIME 1005

updated 3/11/97 2%

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| <b>ANSWERED</b>   |  |   |                                       |
| Lab <input checked="" type="checkbox"/>   | Safety <input type="checkbox"/>                                      | Guard <input checked="" type="checkbox"/>   |                                       |
| Name of person calling <u>Brett Hymas</u>   |  | Was 333 called? <u>YES</u>  |                                       |
| Nature of emergency   |  |   |                                       |
| <input type="checkbox"/> Accident   | <input checked="" type="checkbox"/> Release (amount <u>150 gal</u> ) |   | Number of people injured <u>70 90</u> |
| <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion                                   |   |                                       |
| Detailed Comments: <u>10:00 Loaded Truck LSC Train valves open Pumped Product into containment sump</u>               |  |   |                                       |
| Area of emergency   |  |   |                                       |
| <input type="checkbox"/> Calciner<br>(397)  | <input type="checkbox"/> Phos<br>(345,371)                           | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)   |                                       |
| <input type="checkbox"/> Wash Plant<br>(248,249)  | <input checked="" type="checkbox"/> SPA<br>(370)                     | <input type="checkbox"/> Warehouse<br>(338,396)   |                                       |
| <input type="checkbox"/> N.E. Maint<br>(251,412)  | <input type="checkbox"/> North H2SO4<br>(359)                        | <input type="checkbox"/> Maint. Shop<br>(221)   |                                       |
| <input type="checkbox"/> Rollover & Reclaim<br>(232,236)  | <input type="checkbox"/> East H2SO4<br>(358)                         | <input type="checkbox"/> Shipping<br>(348)  |                                       |
| <input type="checkbox"/> E&I shop<br>(258,268)  | <input type="checkbox"/> Silica<br>(224,225,226)                     | <input type="checkbox"/> NH3 Maint shop<br>(423)  |                                       |
| <input type="checkbox"/> Ball Mill<br>(344)   | <input type="checkbox"/> DAP<br>(227)                                | <input type="checkbox"/> Front offices<br>(0,266)   |                                       |
| <input type="checkbox"/> Pond   |  | <input type="checkbox"/> NH3 Sphere<br>east or west   |                                       |
| Nature of injuries  |  |   |                                       |
| <input checked="" type="checkbox"/> None  | <input type="checkbox"/> Thermal burn                                | <input type="checkbox"/> Laceration   |                                       |
| <input type="checkbox"/> Fall   | <input type="checkbox"/> Chemical burn                               | <input type="checkbox"/> Other  |                                       |
| Area of body affected   |  |   |                                       |
| <input type="checkbox"/> Eyes   | <input type="checkbox"/> Arms  | <input type="checkbox"/> Back   |                                       |
| <input type="checkbox"/> Face & head  | <input type="checkbox"/> Hands                                       | <input type="checkbox"/> Legs   |                                       |
| <input type="checkbox"/> Neck   | <input type="checkbox"/> Chest                                       | <input type="checkbox"/> Feet   |                                       |
| Do we Need?   |  |   |                                       |
| <input type="checkbox"/> Ambulance  | <input type="checkbox"/> Evacuation                                  | <input type="checkbox"/> Emergency Response Team  |                                       |
| <input type="checkbox"/> Other  | <input checked="" type="checkbox"/> None                             |   |                                       |
| Wind direction & speed <u>MPH 0</u>   |  | <p>Send to Zone 4 315 NW</p> <p>Send to Zone 1 45 NE</p> <p>270 West</p> <p>225 SW</p> <p>Send to Zone 3</p> <p>135 SE</p> <p>Send to Zone 2</p> <p>180 South</p> |                                       |
| Cross out area that the wind is coming from. This will tell where to send the people to.                              |  |   |                                       |
| Send to Zone <u>3</u> No wind send to Zone 3  |  |   |                                       |
| Filled out by <u>Howard E Johnson Jr</u>  |  | Visual check  |                                       |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |  | <input type="checkbox"/> North to South   |                                       |
|   |  | <input type="checkbox"/> South to North   |                                       |
|   |  | <input type="checkbox"/> East to West   |                                       |
|   |  | <input type="checkbox"/> West to East   |                                       |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
 Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
 John Tippetts, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist

# EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE 12-25-97

TIME 1630

updated 3/11/97 2%

|   |   |  |   |   |
|---|---|--|---|---|
| <b>ANSWERED</b>   |   | Lab <input checked="" type="checkbox"/>                | Safety <input type="checkbox"/>                             | Guard <input checked="" type="checkbox"/> |
| Name of person calling <u>DIAL Harris</u>   |   | Was 333 called? <u>Yes</u>                             |   |   |
| Nature of emergency   | <input type="checkbox"/> Accident   | <input type="checkbox"/> Release (amount <u>ALOT</u> ) | Number of people injured _____                              |   |
|   | <input type="checkbox"/> Fire   | <input type="checkbox"/> Explosion                     |   |   |
| Detailed Comments: <u>4270</u>  |   |  |   |   |
| Area of emergency   | <input type="checkbox"/> Calciner<br>(397)  | <input type="checkbox"/> Phos<br>(345,371)             | <input type="checkbox"/> Chem bldg<br>(212,413,301,210)     |   |
|   | <input type="checkbox"/> Wash Plant<br>(248,249)  | <input type="checkbox"/> SPA<br>(370)                  | <input type="checkbox"/> Warehouse<br>(338,396)             |   |
|   | <input type="checkbox"/> N.E. Maint<br>(251,412)  | <input type="checkbox"/> North H2SO4<br>(359)          | <input type="checkbox"/> Maint. Shop<br>(221)               |   |
|   | <input type="checkbox"/> Rollover & Reclaim<br>(232,236)  | <input type="checkbox"/> East H2SO4<br>(358)           | <input type="checkbox"/> Shipping<br>(348)                  |   |
|   | <input type="checkbox"/> E&I shop<br>(258,268)  | <input type="checkbox"/> Silica<br>(224,225,226)       | <input type="checkbox"/> NH3 Maint shop<br>(423)            |   |
|   | <input type="checkbox"/> Ball Mill<br>(344)   | <input checked="" type="checkbox"/> DAP<br>(227)       | <input type="checkbox"/> Front offices<br>(0,266)           |   |
|   | <input type="checkbox"/> Pond   |  | <input type="checkbox"/> NH3 Sphere<br>east or west         |   |
|   |   |  |   |   |
|   |   |  |   |   |
|   |   |  |   |   |
| Nature of injuries  | <input type="checkbox"/> None   |  | <input type="checkbox"/> Thermal burn                       |   |
|   | <input type="checkbox"/> Fall   |  | <input type="checkbox"/> Laceration                         |   |
| Area of body affected   | <input type="checkbox"/> Eyes   |  | <input type="checkbox"/> Arms                               |   |
|   | <input type="checkbox"/> Face & head  |  | <input type="checkbox"/> Back                               |   |
|   | <input type="checkbox"/> Neck   |  | <input type="checkbox"/> Hands                              |   |
|   | <input type="checkbox"/> Chest  |  | <input type="checkbox"/> Legs                               |   |
| Do we Need?   | <input type="checkbox"/> Ambulance  |  | <input type="checkbox"/> Evacuation                         |   |
|   | <input type="checkbox"/> Other  |  | <input checked="" type="checkbox"/> Emergency Response Team |   |
| Wind direction & speed  | MPH _____   |  |   |   |
|   | Cross out area that the wind is coming from. This will tell where to send the people to.<br>Send to Zone _____ No wind send to Zone 3 |  |   |   |
| Filled out by <u>Cody Lowe</u>  |   |  |   |   |
| As soon as the caller hangs up, they must come to the lab to guide the First aid people to the scene of the accident. |   |  |   |   |

Copies to: Mike Tucker, Doug Graunke, Neil Christensen  
Monty Johnson, Clay Gentry, Paul Hooper, Ron Stein  
John Tippets, Teri Ancho, Supervisor of Department

Excel File : 333 Checklist